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 COMMITTEE TO ELECT BOB BYRD d. Date Filed b. Mailing Address (include City. State and Zip Code) 2826 CHARLOTTE LANE 10/25/2021 BURLINGTON, NC 27215 e. Phone Number (336) 584-7302 CAROLINE KING 10/18/2021 09/21/2021 2021 (check only one type of report from one category) 6. Type of Committee (Check One) 9. Type of Report State/County Referendum X Candidate Campaign Municipal □ Party Organizational □ PAC Organizational ☐ Joint Fundraiser Organizational □ Pre-referendum Legal Expense Fund Thirty-five day Quarterly ☐ Referendum 7. Type of Fund (if applicable, check one) Final Pre-primary First Supplemental Final Booster Fund Pre-election Second Annual Pre-runoff Third Building Fund Presidential Election Year Candidates Fund Semi-annual Fourth Special NC Public Campaign Financing Fund Mid Year Semi-annual Mid Year Year End 10. Special Report Name Year End Final Other: Special Final 8. Number of Fundraisers this Report Special 3. Account Information 3. Account Information a. Financial Institution Full Name a. Financial Institution Full Name CAPITAL BANK, NA c. Account Code b. Purpose c. Account Code b. Purpose CHECKING 1 d. Period Begin Balance d. Period Begin Balance 14,211.61 \$ 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 10/25/2021 Date Signature of Appointed Treasu Printed Name of Signer FOR OFFICE USE ONLY Delivery Method Employee: Date Received: ☐ Normal Mail Registered Mail Employee: Date Postmarked: Z Hand Delivered Electronically Filed Date Scanned: Employee: ☐ Signer has not received Employee: Date Data Entered: 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.

Amendment ☐ Yes X 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 Re		3. ID	Number
COMMITTEE TO ELECT BOB BYRD	2021 Pre-Ele	ection		
Start of Election Cycle: January 1, 2020		Total this Reporting Peri	iod	Total this Election Cycle
4) Cash on Hand at Start		\$ 14,211	.61	\$ 3,036.32
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 740	.00	\$ 2,305.00
6) Contributions from Individuals	(CRO-1210)	\$ 2,650	.00	\$ 8,452.91
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0	.00	\$ 10,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0	.00	\$ 0.00
11) Other Receipt Sources				e del di introprime di iligili e e e e a gli di del dissipi e e di iligili e
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)	\$ 500	.00	\$ 500.00
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)	\$ 3,890	.00	\$ 21,257.91
EXPENDITURES	Anna en Couras de centra de antigen de entre en entre en			
13) Disbursements		Spile State (Spile)	spine in the	
13a) Operating Expenditures	(CRO-1310)	\$ 9,721	.99	\$ 15,628.34
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)	\$ 133	.48	\$ 291.84
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)	\$ 500	.00	\$ 627.91
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 10,355	.47	\$ 16,548.09
19) Cash on Hand at End (Add lines 4 and 12 together, then su	otract line 18)	\$ 7,746	.14	\$ 7,746.14
<u>ADDITIONAL INFORMATION</u>				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		.00	, podlest pokatovat avstr Karasta da karasta karasta
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 10,000		
22) Debts and Obligations owed by the Committee	(CRO-1610)		.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)		.00	ar is distributação de la companion de la comp
24) Account Transfers Within the Committee	(CRO-1720)		.00	22 有形的 6 的复数
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-2220)	-	-+	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0	.00	\$ 0.00 August 2008

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				c. ID Number
a, Full Name COMMITTEE TO ELECT B	OR RYRD			C. ID Number
b. Mailing Address (include Ci	iy, State and Zip Code)			d. Date Filed
2826 CHARLOTTE LANE BURLINGTON, NC 27215				10/25/2021
,				e. Phone Number
				(336) 584-7302
2. Report Year 3. Period Star	t Date (mm/dd/yy)	4. Period End Dat		
2021 09	9/21/2021	10/18/26	021 CAROLIN	IE KING
6. Type of Committee (Check C			eck only one type of rep	
☐ Candidate Campaign ☐ Par☐ Joint Fundraiser ☐ PA	<u> </u>	oi pal : : : : : : : : : : : : : : : : : : :	State/County Organizational	Referendum Organizational
	gal Expense Fund	Thirty-five day	Quarterly	Pre-referendum
7. Type of Fund (if applicab		Pre-primary	First	Final
Booster Fund"	X	Pre-election	Second	Supplemental Final
Building Fund		Pre-runoff	Third	Annual
Presidential Election Year Can	l	Semi-annual	Fourth	☐ Special
■ NC Public Campaign Financing	g Fund	Mid Year Year End	Semi-annual Mid Year	
Other:	H	Final	Year End	10. Special Report Name
8. Number of Fundraisers this		Special	Final	
0			Special	
3. Account Information	ADYSZEDINISMENT MAGNETALI	3. Acco	ount Information	Marin di pipikin di Kalendari
a. Financial Institution Full Na	me		ucial Institution Full Nam	e di di marata di malata di
CAPITAL BANK, NA				
b. Purpose	c. Account Code	b. Purp	ose	c. Account Code
CHECKING	1			
	d. Period Begin Balan			d. Period Begin Balance
	. I . I with a literature			
	\$	14,211.61		\$
CERTIFICATION			Total Haratida i i sa sa sing bilang sa	
I certify that the Committee				
Chapter 163 of the NC Gener				
funds. I further certify that t	this report is complete.	, true and correct ar	nd that I have been traine	ed by the NC State Board
				10/25/2021
Printed Name of S	ligner	Signature of A	Appointed Treasurer	Date
FOR OFFICE USE ONLY				
Date Received:		Employee:	· · · · · · · · · · · · · · · · · · ·	ivery Method
			rational to a larger trape a community and trape (Normal Mail Registered Mail
Date Postmarked:		Employee:		Hand Delivered
				Electronically Filed
Date Scanned:		Employee:		
Date Data Entered:		Employee: _		Signer has not received mandatory training
Please Note: This form of	annot be used to ame	nd committee infor	mation such as the comm	ittee address, treasurer,
			ion, or account informatio	· · · · · · · · · · · · · · · · · · ·

Amendment ☐ Yes X 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)			3. ID	Number
COMMITTEE TO ELECT BOB BYRD	2021 Pre-Ele	ection		
Start of Election Cycle: January 1, 2020		Total this Reporting Peri	od	Total this Election Cycle
4) Cash on Hand at Start		\$ 14,211.	61 \$	3,036.32
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 740.	00 \$	2,305.00
6) Contributions from Individuals	(CRO-1210)	\$ 2,650.	00 \$	8,452.91
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.	00 \$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.	00 \$	0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.	00 \$	10,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.	00 \$	0.00
11) Other Receipt Sources	and the A. A. A. STOCK AND TO SHOW A THUMBOURD AT ALL TO THE COST AT THE COST			
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)	\$ 500.	00 \$	500.00
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)	\$ 3,890.	00 \$	21,257.91
EXPENDITURES				
13) Disbursements	an and and to deligate two and and the total state of protections and and the			
13a) Operating Expenditures	(CRO-1310)	\$ 9,721.	99 \$	15,628.34
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)	\$ 133.	48 \$	291.84
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)	\$ 500.	00 \$	627.91
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 10,355.	47 \$	16,548.09
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 7,746.	14 \$	7,746.14
ADDITIONAL INFORMATION	(CDQ 1220)		00	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 10,000.	200	SPASSITATION SURFICIENTS
22) Debts and Obligations owed by the Committee	(CRO-1610)		00	nershinalia di Sucilia. Sepustra 2 descri
23) Debts and Obligations owed to the Committee	(CRO-1620)		00	er en er gert begeltet bis Gertagen
24) Account Transfers Within the Committee	(CRO-1720)		00	and the state of t
25) Administrative Support	(CRO-1710)		00 \$	0.00
26) Forgiven Loans	(CRO-1440)		00 \$	0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)		00 \$	0.00
28) Contributions to be Refunded NC State Board	(CRO-1215)	\$ 0.	00 \$	0.00 August 2008

Aggregated Contributions from Individuals Page 1 of

1

Amendment ☐ Yes X No

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

						Number
35,300,200		EE TO ELECT B				
20.50	777				February Statement Communication Communicati	7.
a. /	Amend	b. Account Code		d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
	Add Remove	1	Electric Funds Tran		09/27/2021	\$ 50.0
	Add Remove	1	Check		09/22/2021	\$ 25.0
	Add	1	Check		09/22/2021	\$ 25.0
ᆸ	Remove Add	1	Check		09/22/2021	\$ 50.0
	Remove				09/22/2021	\$ 30.0
	Add Remove	1	Electric Funds Tran		10/11/2021	\$ 25.0
	Add Remove	1	Check		09/22/2021	\$ 50.0
ㅁ	Add Remove	1	Check		09/24/2021	\$ 50.0
	Add	1	Electric Funds Tran		09/24/2021	\$ 25.0
님	Add -	1	Check		09/22/2021	\$ 50.00
H	Remove Add	1	Check		09/22/2021	\$ 25.00
	Remove Add	1	Check			
	Remove Add		Check		09/22/2021	\$ 50.00
	Remove	1			09/23/2021	\$ 40.00
	Add Remove	1	Check		10/05/2021	\$ 50.00
	Add Remove	1	Check		10/11/2021	\$ 50.00
	Add Remove	1	Electric Funds Tran		10/07/2021	\$ 50.00
	Add Remove	1	Check		10/10/2021	\$ 50.00
님	Add	1	Check		09/22/2021	\$ 50.00
	Remove Add	1	Check		09/25/2021	\$ 25.00
	Remove	ly this Page	- Grand Conspiritation of the second	kasi prizil saki istoroje, vlativimo	\$	\$740.00
		ALL CRO-12	05 Pages			\$740.00
(This line m	and the street of the control of the	etalled Summary Page (CRO-1100) C State Board of Elections	\$	\$ /40.00 April 20
CA	RO-1205		NO	Diate Doald of Elections		April 20

Conf	tributions fr	om Individuals	2	D _	1 of 6		Amendme	nt XI No
_		dividual contributions		_		- 1205	£	
		(and Fund if applicab						
COMN	MITTEE TO ELE	CT BOB BYRD						
3. Cont	ributor Informati	on and the little and the little		Add 🔲 Re	nove			665 (lu665)
100000000000000000000000000000000000000	Name, Mailing Ado			b. Job Title/Pr	ofession	d. (Comments	
	ude city, state, & z			RETIRED				
	LINE ANSBACH VEST DAVIS ST			c. Employer's	Name/Specific Field			
	INGTON, NC 27			RETIRED				X
(336) 2	226-8124					e. I	dection Sur	n to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k. Amount	Bridgillijs Hillioni
	1	Electric Funds Tran			10/14/2021		\$	100.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add 🔲 Re	move.			
The state of the s	Name, Mailing Ado			b. Job Title/Pr	ofession	d. (omments	
<u> </u>	ide city, state, & z	ip)		RETIRED				
	IAS BALTUTIS 0TH AVE S			c. Employer's	Name/Specific Field	F		
9	EAPOLIS, MN 5	55417		RETIRED	3 a m 1 a 1 a 1 a 1 a 1 a 1 a 1 a 1 a 1 a	<u> </u>		
						e. I	dection Sur	n to Date
•						\$		500.00
f. Prior	g. Account Code	<u> </u>	i. In-Kind Des	cription	j. Date (mm/dd/yyyy		k. Amount	
	1	Electric Funds Tran			10/06/2021		\$	500.00
							\$	
							\$	
	ributor Informati			2011	nove			
	Name, Mailing Ado ide city, state, & z			b. Job Title/Pr	ofession	d. C	omments	
3 1.03 Lo. 61 1 1 1 1 1	D CARTER			REALTOR				
	RCLE DRIVE			c. Employer's	Name/Specific Field			
1	INGTON, NC 27	215		ALLEN TAT	E REALTORS	. I	lection Sur	u to Data
(336) 6	593-5551						ection Sui	1 10 10 10 10 10 10 10 10 10 10 10 10 10
a m	The Particular Section (Control of the Control of t		1. 1. 12. 1 iv.	Stratification	Proposilovilla. Vadvinace	\$	k. Amount	250.00
	g. Account Code	h. Form of Payment Electric Funds Tran	i, In-Kind Des	cription	j. Date (mm/dd/yyyy)		paging agrangitals, spil	
	1				09/23/2021		\$	250.00
							\$	
							\$	
T 10 THE R PRODUCT OF THE R. P. L.	al only this Pa			124099		\$		850.00
	al of ALL CR! line must be on line	O-1210 Pages 6 of Detailed Summary 1	Page CRO-1100)			\$		2,650.00

		om Individuals		_	2 of 6	-	☐ Yes	No No
		dividual contributions (and Fund if applicab			der \$50 if form CRO			
10,000000000000000000000000000000000000	MITTEE TO ELE		.	nning takka Hini (a. 1864 ∓ 18		***	iD (unite)	
3. Cont	ributor Informati	on a series of the series		Add 🔲 Re	nove		etin ünder sein	produkta
1995, at children and day	Name, Mailing Ado	aan kara da da da abada ya ya ka a 1990 ili ka 1916 ili ka 1900 ili ka 1900 ili ka 1900 ili ka 1900 ili ka 190		b. Job Title/Pr			Comments	
	ide city, state, & z	ip)		RETIRED				
	CURRIN RAPE MYRTLE (COURT		c. Employer's	Name/Specific Field			
	INGTON, NC 27			RETIRED				
(336) 2	212-4125					e. I	dection Sur	n to Date
						\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			10/02/2021		\$	200.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add 🔲 Rei				
	Vame, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments	
	ide city, state, & z	<u>(D</u>		RETIRED				
	EWING HANNING COU	(RT		c. Employer's l	Name/Specific Field			
BURL	INGTON, NC 27			RETIRED			and the same of the same	todroel (* 100) redesi
(919) 8	802-6021						dection Sur	
						\$		200.00
f. Prior	9 (10.00)	h. Form of Payment Check	i. In-Kind Des	eription	j. Date (mm/dd/yyyy)	ir iirileen Karlisal	k. Amount	
	1	Check			09/21/2021		\$	200.00
							\$	
							\$	
	ributor Informati			Add 🔲 Rei				
	Name, Mailing Add ide city, state, & zi			b. Job Title/Pro RETIRED	lession	a. C	omments	
13.33.11.0000	ONY FORIEST			KEIKED				
	UAIL DRIVE			c. Employer's l	Name/Specific Field			
	AM, NC 27253			NONE		e. F	lection Sur	n to Date
(336) 2	27-3011					\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i, In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/22/2021		\$	100.00
							\$	
			-			······	\$	
4. Tot	al only this Pa	ger at handalari				\$	l	500.00
5. Tot	al of ALL CRO	X	Page CRO-1100)			\$		2,650.00

Amendment

~	9 4 6.	T. 12.231.	_		2		Amendme	_
		om Individuals dividual contributions		_	3 of 6	_	Yes	X No
		(and Fund if applicabl			ider \$50 ii form CRO			
	TITTEE TO ELE						II : \UIIIO	
\$50 may \$40 ma	cibutor Informati iame, Mailing Add			Add Re	move	la	Comments	
I SS 255 de decenhologi	de city, state, & z			RETIRED			Comments	
1	ANN GANT						•	
	ORESTDALE DI				Name/Specific Field	-		
	INGTON, NC 27 27-8323	215		RETIRED		e.	Dection Su	m to Date
(330) 2	27 0323					\$		100.00
C Dalas	a Adams Cods	h. Form of Payment	i. In-Kind Des	crintian	j. Date (mm/dd/yyyy		k. Amount	
	g. Account Code	Check	i i ilii ixilii u bes	CIAPUOMEETE		<i>)</i> :::::::::::		
		_			09/22/2021		\$	100.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add 🔲 Re	move			
	lame, Mailing Ado			b. Job Title/Pr	ofession	d. (Comments	
	de city, state, & z	ip):		NOT EMPLO	OYED			
RUSSE PO BO	EL GUY			c. Employer's	Name/Specific Field			
	NGTON, NC 27	216		NOT EMPLO	OYED	Ĺ		
	13-0190					e. I	Dection Sur	n to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k, Amount	di de alicide de did
	1	Check			09/22/2021		\$	100.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add 🔲 Rei	nove			
	ame, Mailing Add			b. Job Title/Pr		đ. (omments.	
	de city, state, & z	(7)		ACCOUNTIN	√G			
	HEATH APLE AVE E1			c, Employer's l	Name/Specific Field			
	NGTON, NC 27	215		HOSPICE OF	T	<u> </u>		
(336) 5	12-3135			ALAMANCE	E-CASWELL	e. J	dection Sur	n to Date
			T			\$		100.00
f. Prior		h, Form of Payment Electric Funds Tran	i, In-Kind Des	eription	j. Date (mm/dd/yyyy)		k. Amount	er enden minnet av teres
	1	Electric Funds Train			09/26/2021		\$	100.00
							\$	
							\$	
4. Tota	al only this Pa	ge i de la libraria de la compansión de la	Maria Kurian			\$		300.00
	al of ALL CR(ine must be on twe	D-1210 Pages 6 of Detailed Summary P	tuge CRO-1100)			\$		2,650.00

Use this	s form to report in	dividual contributions over	r \$50 or cont	ributions un	der \$50 if form CRO	1205	is not ı	ısed
1. Com	mittee Full Name	(and Fund if applicable)				2.1	D Num	ber
COMM	MITTEE TO ELE	CT BOB BYRD						
				41 – 10				
	ributor Informati Name, Mailing Ado			dd 🔲 Rer Job Title/Pro		la c	Comme	- 4
Harar Islanda Arabi India	vame, Mairing Adi ide city, state, & z			renteral actions and article	nession	u. C	Joinmen	118
	100		N	ONE				
	Y HEMRIC SILL COOPER R	OAD	c.	Employer's N	Name/Specific Field			
1	PLER, NC 2861			IONE	<u> </u>	1		
	260-8003	,	1	TONL		e. E	lection	Sum to Date
(330) 2	.00 0005					\$		100.00
								100.00
f. Prior	g. Account Code		-Kind Descri	ption	j. Date (mm/dd/yyyy)		k. Amo	unt iii ii ii ii
	1	Check			10/06/2021		\$	100.00
			,				\$	
							\$	
2 (**	 ributor Informati		ПΔ	dd □ Rer	nove			
ENGINEERINGS.	Name, Mailing Ado			Job Title/Pro		a. (Commer	uts
	ide city, state, & z			ETIRED		1.7.7.1.11	11-11-11	<u> </u>
	KERNODLE		N	LIIKED				
	ILL RUN LANE		č.	Employer's N	lame/Specific Field	1		
	AM, NC 27253		R	ETIRED				
	28-9693					e. E	lection	Sum to Date
` ′						\$		100.00
A Line of the line	en ann a an ann aite an	h. Form of Payment i. In-	-Kind Descri	gangganala ata	j. Date (mm/dd/yyyy)		k. Amo	
i, Prior		Electric Funds Tran	-Kina Descri	biten			K. Amo	
	1	Diceate Funds Fran			09/27/2021		\$	100.00
							\$	
							\$	
3 Cont	ributor Informati	OR .	ПА	dd 🔲 Ren	nove			
	lame, Mailing Add			Job Title/Pro		d. C	Commer	its a la l
. 4. 4 - 100 - 100 - 100	ide city, state, & z		SI	ELF	- Migrit on the operation of provide the comme			_1,
LISAN	MARINIS							
	ODGES ROAD		c.	Employer's N	ame/Specific Field			
	INGTON, NC 27	7215	S	ELF				
(407) 3	25-4379					e. E	lection	Sum to Date
		•				\$		100.00
f, Prior	g. Account Code	h. Form of Payment i. In-	Kind Descri	ption	j. Date (mm/dd/yyyy)		k. Amo	unt
	1	Electric Funds Tran			09/28/2021		\$	100.00
							\$	
							\$	
4. Tot	al only this Pa	german kan di kanan di kanan Kanan di kanan di ka				\$		300.00
5. Tot	al of ALL CR	O-1210 Pages	no tro		ala probe de la langada Talendaria	\$		2,650.00

Contributions from Individuals

Amendment

☐ Yes 🏻 No

Pg 4 of 6

		om Individuals			5 of 6	-	☐ Yes	X No
		ndividual contributions						
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(and fund if applicabl	(e)			2.)	iD Number	
COMM	MITTEE TO ELEC	CL BOR BAKD						
	ributor Informati							
CONTRACTOR OF THE PROPERTY OF	Name, Mailing Add			b. Job Title/Pro	ofession	d. C	Comments	
	ide city, state, & zi RA MOULTON	(P)		RETIRED				ļ
	RA MOULTON RAVIS LANE			c. Employer's ?	Name/Specific Field			ĺ
GIBSO	ONVILLE, NC 27	7249		RETIRED			—	TOTAL SERVICE SERVICES
(336) 4	149-5678						Dection Sur	
_						\$		250.00
f. Prior			i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	t -
	1	Check			09/22/2021	·	\$	100.00
	1	Check			09/22/2021		\$	150.00
							\$	
	ributor Informatio			Add 🔲 Rer				
5, 8996 (4870 4470 4470 447	Name, Mailing Add			b. Job Title/Pro		d. (Comments	
	ide city, state, & zi			ATTORNEY				Ī
	NON PETERSON EORGETOWNE 1			c. Employer's !	Name/Specific Field	1		
ELON,	, NC 27244	Dia i L		GUILFORD	COUNTY		A STATE OF THE STA	20 20 20 20 20 20 20 20 20 20 20 20 20 2
(336) 5	524-0402						Election Sur	n to Date
			ļ			\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	E
	1	Check			09/22/2021		\$	100.00
							\$	
							\$	
	ributor Informati			Add 🔲 Ret		ŧ.,		
	Name, Mailing Add ide city, state, & zi			b. Job Title/Pro		d, c	Comments	
	A PETERSON JE	11.771.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	<u>, (Lini: Ellenberkter)</u>	INSURANCE	, AGENT			
	A PETERSON IN EORGETOWNE I		ļ		Name/Specific Field			
ELON,	, NC 27244		ļ	JA PETERSO	ON INC		Dection Sur	noto
(336) 2	212-2193		ļ				Jecuon Das	
7 70 11 11		t Downant	i. In-Kind Desc	Teachers and the second	j. Date (mm/dd/yyyy)	\$	k. Amount	100.00
	g. Account Code	h. Form of Payment Check), M-Ninu Des	cripuon	THE PROPERTY OF THE PROPERTY O		1	
	1				09/22/2021		\$	100.00
							\$	
			***************************************	0.000		·*	\$	
	al only this Pa	-			A PARTY AND THE PARTY OF THE PA	\$	· · · · · · · · · · · · · · · · · · ·	450.00
	al of ALL CRO	O-1210 Pages 6 of Detailed Summary P	Page CRO-11(0)		and produced appropriations	\$		2,650.00

Contributions from Individuals

Amendment

		om Individuals dividual contribution		P _i ontributions u	-		_	Amendme Yes is not use	X No
		(and Fund if applicab		n late tent		nd dei il		ID Numbe	
COMN	MITTEE TO ELEC	CT BOB BYRD							
3. Cont	ributor Informati	on a description be		Add 🔲 R	emove	luistingens			
a. Full	Name, Mailing Ado	iress & Phone		b. Job Title/P	rofession		d. (Comments	
(incl	ide city, state, & z	(g)		RETIRED					
JAME	S ROBERSON								
	HIRLEY DRIVE			c. Employer's	Name/S	pecific kield			
BURLINGTON, NC 27215				RETIRED			آ ۾	dection Su	m to Data
(336) 3	380-5665							deciion 3a	iii to Date
							\$		250.00
f. Prior	g. Account Code	h, Form of Payment	i. In-Kind Des	cription	j. Date	(mm/dd/yyy	y)	k. Amoun	t de la
	1	Check			1	0/12/2021		\$	250.00
								\$	
								\$	
4. Tot	al only this Pa	ge distribution de deservi					\$	•	250.00
	al of ALL CRO)-1210 Pages 6 of Detailed Summary	Page CRO-1100)			egs (Alberta egs (Alberta	\$		2,650.00

NC State Board of Elections

CRO-1210

April 2007

	eipt Sources report income not repo	orted on another fo	_		of		Amendme Wes t contribut	No No
1. Committee Fu	II Name (and Fund if a	pplicable)			,	_	ID Number	
	TO ELECT BOB BYF							
3. Type of Recei		<i>e separate CRO-1</i> utions from Not-for-	an ann an ann ann ann an aire an fail an 1 faoi aidh fail faoi an bail ann ann faoi ar an	200 x 201 x 201 X 20 x 201 x 2	N in talk took at erteroor too each fact took full too	Scoolal Contact Contact	CONTRACTOR	
4. Contributor l				move	and a same	ann ar an	Gulden and a	eli filik k
a, Full Name, Ma (include city, s	iling Address & Phone state, & zip)		b. Not-for-Pro	mt kede	rai iv#	a. •	Comments	
NC DEMOCRA 220 Hillsboroug		•	c. Outside So	urce Exp	lanation			
RALEIGH, NC	27602·			arti II intinia. A			Dection Su	
(919) 821-2777						\$	dection su	т то Date 500.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip) otion	i. Date	(mm/dd/		j. Amoun	
1	In-Kind	VOTEBUILDER I ACCESS			0/01/202	nan nan da	\$	500.00
							\$	
5. Total only	<u> </u>					\$		500.00
6 Total of Al	11. CRO-1250 Pao	es						

CRO-1250

(This line goes in line 116 of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) (This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income) NC State Board of Elections

(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)

December 2007

\$

500.00

-	•						
13	10	hı	Irc	ΔI	me	ents	
		E/L	41.7				

				Amendment							
Pg	1_	of	4		Yes	X No					

	II Name (and Fund TO ELECT BOB B							2. 10 Nun	abert de made de la
3. Type of Disbu		use separate CRC				of Disbu	rseme	nt.)	
Operating Exp	enses 🔲 Cont	ributions to Candidat	es/Polit	ical Committees		Coc	rdinat	ed Party Ex	penditures
4. Payee Informa	ation	Adam balake		Add 🔲	Remo	ve			
	iling Address & Ph	one		b. Coordinate	d Com	mittee Na	ame	d. Comme	nts
(include city, stat	e prime Willeling of Children Calabi Scotler (p. 1911)								
AMAZON WEI	3 SERVICES								
410 TERY AVE				c. Level Regis	tered (
SEATLE, WA				☐ Federal		00			
·				☐ State	L	Municip	ality:	e. Dection	Sum to Date
								\$	298.87
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount 💮	k. Re	quired Rer	narks
1	Debit Card	AK	10	0/02/2021	\$	21.84	WE	SERVIC	ES
					\$				
4. Payce Informa	rion -		П	Add 🔲	Remo	ve			
See Seed to the war and a seed on the seed of the seed	iling Address & Ph	one		b. Coordinate	400 March 1990 March 1		ım e	d. Comme	nts
(include city, stat	TO BE LETTER STORY OF THE PROPERTY OF THE PARTY OF THE PA					' o, 1 o 11 o 11 o 11 o 11 o 1	11g1111111111111		
CAMPAIGN VI				1					
8605 WESTWO		c. Level Regis	tered (Specify)					
SUITE 505				Federal		County:			
VIENNA, VA 2	22182			☐ State		Municip	ality:	e. Election	Sum to Date
, <u></u>								\$	95.00
	g. Form of Payment	h Purpose Code	i Doto	Cmm (dd/strospy)	li am	a di alia di mare	l Re	quired Res	
		K		9/26/2021		95.00		ISTRATIO	
1	Debit Card	K	U:	9/20/2021	\$	93.00	KEU	ISTRATI	JN
			<u>.</u>		\$				
4. Payce Informa				Add 🔲 🔻	Remo	(00000000000000000000000000000000000000			
	iling Address & Pho	one		b. Coordinate	d Com	mittee Na	ıme	d. Comme	nts
(include city, stat	e, & zip)								
FACEBOOK					umminerė,	~ Ia S	de fili bededende		
1 HACKER WA				c. Level Regis	terea (
MENLO PARK,	, CA 94025			Federal State	-	County: Municip		a mastica	Sum to Date
(888) 275-2174				L State		I Municip	amy.	e, Mechon	Sum to Date
								\$	230.82
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Ren	narks
1	Debit Card	A	10	0/06/2021	\$	25.00	FAC	EBOOK A	DS
1	Debit Card	A	10	0/17/2021	\$	9.21	ADS		
5. Total only this	Page	a ka da a ka a a a a a a a a a a a a a a						\$	151.05
6. Total of ALL C									
	line 13a of Detailed S	lummary Page CRO.	.1100 if	Onerating Fyne	nses)			_	
, ,	t line 13h of Detailed S	• •				Political C	omm)	\$	9,721.99
	line 13c of Detailed S								
7. Purpose Co	des (List detailed	expenditure code	in (h.) :	above)					
A* - Media	B* - Printin	* 7	(0.00 <u>/2100000</u>	undraising		D - To	Anoth	ner Candid	ate
E - Salaries	F* - Equipm	Property and the contract of t		litical Party		Chicken and a proper property of			fice Expenses
I - Postage	J - Penaltie			office Expenses	.	Strate over print and strategy in the	terrane in the	detaile of the first of the	Expense Fund
O* Other		:	277/10						-
	detailed explanatio	n in required ren	iarks f	ield (k)					

D	ie	hn	re	Δ	m	ρ	nts	
1,	13	. Du		C	111	v	1110	١

				Amendm	ent
Pg	2_	of	4_	☐ Yes	X No

	. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT BOB BYRD											
3. Type of Disbu Operating Exp	rsement Please	use separate CRC ributions to Candidat			typ			nt.) ed Party Ex	kpenditur	es		
4. Payee Inform	ation			Add 🔲	Ren	тоуе						
	ailing Address & Pho	one		b. Coordinate	d Co	mmittee Na	me	d. Com m	ents			
(include city, sta			i ivi iziliniya									
MEDA CORPO				c. Level Regis	erec	(Specify)	l-GALEEN					
ASHEVILLE, N	UNTAIN ROAD		Federal	4-1-1-1-1	County:	<u>Pektane</u>						
ASDEVILLE, I	NC 20004			☐ State		☐ Municip	ality:	e. Electio	n Sum t	o Date		
								\$	6	,590.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ai	nount	k. Re	quired Re	marks			
1	Check	AB	10	0/18/2021	\$	500.00	POS	TCARDS	,			
					\$							
4. Payee Inform	ation			Add 🗆	Ren	iove .						
	ailing Address & Pho	one		b. Coordinate	d 54 of sector of		m e	d. Comm	ents			
(include city, sta												
OFFICE DEPO					(chronien)) v	1525-1016-000-1-5-00-00						
1825 S CHURC				c. Level Regis	terec	(Specify) County:						
BURLINGTON	, NC 27215			State				e. Electio	n Sum t	o Date		
(336) 226-6122						<u> </u>		Januario Instituti i servic				
								\$,557.36		
	g. Form of Payment							quired Re				
1	Debit Card	K	09	9/25/2021	\$	74.08	PRIN TNK	NTER PA	PAER A	AND		
					\$		IINK					
4. Payee Inform	ation			Add 🔲	Ren	iove						
	illing Address & Pho	one		b. Coordinate	l Co	nmittee Na	m e	d. Comm	ents :			
(include city, sta												
	TATE ASSOCIATE HARMONY CHUR			c. Level Regis	(Specify)							
ROUGEMONT		CH KD		Federal		County:	1 1111					
ROOGEMONT	, 110 27072			☐ State		☐ Municip	ality:	e. Electio	n Sum t	o Date		
								\$	9	,127.08		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Aı	nount	k. Re	quired Re	marks			
1	Debit Card	A	09	9/28/2021	\$	66.03		IGN ANI				
1	Debit Card	A	10	0/01/2021	\$	750.00	₽Ŋ	RFORD	IGITAI	L ADD		
5. Total only thi	s Page			ar naddala				\$	1,	,390.11		
6. Total of ALL	CRO-1310 Pages	and the same		and comments								
	n line 13a of Detailed S					Side British I (Pin Green) Duckle		\$	9	,721.99		
	n line 13b of Detailed S						mm)	*		,,,,,,		
	(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)											
	des. (List detailed					D T-	A n - 41	or Co 4.	loto			
A* - Media E - Salaries	B* - Printin F* - Equipm	171 to 6 to 1 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -		undraising litical Party		CONTRACTOR OF THE PARTY OF THE	24 (122 22 122 122 22 22 22 22 22 22 22 22 2	ner Candid Public O	Character and appearing	nengog		
I - Postage	J - Penaltie			ffice Expenses				n to Lega		•		
O* Other							200 30031 474444	0	E	222222222222222222222222222222222222222		
* Codes require	e detailed explanatio	n in required rem	arks f	ield (k)								

T			
119	burs	eme	nte

				Amendm	ent
Pg	3	of	4_	☐ Yes	X No

	II Name (and Fund TO ELECT BOB B			Nan Arithe Hill				2. ID Nun	iber
3. Type of Disbu		use separate CRC ributions to Candidat			eranak Bergi		*********	nt.) ed Party Ex	i Para di Lucia
Operating Exp		ributions to Candidat					гата	ed Party Ex	penditures
4. Payee Informa a. Full Name. Ma	a tion illing Address & Ph	one		Add		move ommittee Na	ıme	d. Comme	nts
(include city, stat			218 (12 (12 (12 (12 (12 (12 (12 (12 (12 (12		eren nene	<u> </u>	unarannar nere	[- In Indiana	
	TATE ASSOCIATI	ES							
	HARMONY CHUR			c. Level Regis	tere	d (Specify)			
ROUGEMONT,		☐ Federal		County:					
				☐ State		☐ Municip	ality:	e. Election	Sum to Date
								\$	9,127.08
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. 7	Vmount	k. Re	quired Ren	narks
1	Debit Card	A	10)/10/2021	\$	170.00	DIG	TAL ADS	1
					\$				<u> </u>
4. Payee Informa	ition			Add 🔲	Re	move			
Control of the Contro	iling Address & Ph	one		b. Coordinate	NATA 4		ıme	d. Comme	nts
(include city, stat				<u> </u>					
THE MEDA CO									
65 TOWN MOU		c. Level Regist	tere						
ASHEVILLE, NC 28804				Federal		County:			
(828) 252-2585				☐ State		Municip	ality:	e. Hection	Sum to Date
								\$	9,387.80
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. /	Amount	k. Re	quired Ren	narks
1	Check	A	10)/12/2021	\$	2,698.85	POS	TCARD M	IAILING
1	Check	AB	10)/14/2021	\$	2,079.15	POS	ΓCARDS	
4. Payee Informa	ition			Add 🔲	Re	move			
a. Full Name, Ma	iling Address & Pho	опе		b. Coordinated	d C	ommittee Na	m e .	d. Comme	nts
(include city, stat	e, & zip)								
THE MEDA CO	RPORATION								
65 TOWN MOU	JNTAIN ROAD			c. Level Regist	tere				
ASHEVILLE, N	IC 28804			☐ Federal ☐ State		County:	alitur	a Floation	Sum to Date
(828) 252-2585				L State	<u>-</u>	L Willing	anty.	e. Liethon	Sam to Date
								\$	9,387.80
f, Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. <i>4</i>	mount	k. Re	quired Ren	ıarks
1	Check	AB	10	0/16/2021	\$	2,579.15	POS	ΓCARDS	
					\$				
5. Total only this	Poor							\$	7,527.15
								Ψ	7,527.15
6. Total of ALL 0									
	ı line 13a of Detailed S ı line 13b of Detailed S						0 man mag)	\$	9,721.99
	i line 136 of Detailed S i line 13c of Detailed S						,uuni)		
7. Pigmose Co	des (List detailed	expenditure code	in (h.):	ibove)					
A* - Media	B* - Printin			undraising		D - To	Anotl	er Candid	ate
E - Salaries	F* - Equipm	Harrier	game rame as local de da	litical Party	i	. 101-101 11-1			fice Expenses
I - Postage	J - Penaltie		2.4.4	ffice Expenses			of Section 1 will before	THE RESERVED AS A PERSON OF THE	Expense Fund
O* Other					. mužei	–			_
* Codes require	detailed explanatio	n in required rem	iarks fi	eld(k)					

-	•				
1)	16	hii	rce	me	ents
	13	vu	1136	-	

				Amendm	ent
Pg	4	of	4	☐ Yes	X No

1. Committee F	ull Name (and Fund i	fapplicable)			1		111-4-1	2. ID Number	r
COMMITTEE	TO ELECT BOB B	YRD							
	irsement (<u>Please</u>				i eyp				
X Operating Exp	oenses	ributions to Candidat	es/Polit	ical Committees		☐ Coo	rdinat	ed Party Expend	ditures
4. Payee Inform	ation			Add 🔲	Ret	nove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinated	d Co	mmittee Na	me	d. Comments	
(include city, sta	te, & zip)								
,	BA GET THRU				1/6	leteraler feller			
1330 BROADV		c. Level Regis	гегес	County:					
OAKLAND, CA		State		Municip	alitv:	e. Dection Su	m to Date		
(415) 903-0031									
		h. Purpose Code	l: mas	(m m/dd/yyyy)	I.	mount	և Da	\$ quired Remar	1,793.84
	O							(Which to come to control to all a fall for the	K3-
1	Debit Card	A	1'	0/09/2021	\$	247.68	IEA	TING	
					\$				
4. Payee Inform	ation			Add 🔲	Rer	nove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinated	d Co	mmittee Na	me.	d. Comments	
(include city, sta	te, & zip)								
US POSTAL SI	ERVICE	1				1 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in Table III		
405 MAPLE A				c. Level Regist	teret	County:	SELIDINI TIDI)	•	
BURLINGTON				State		☐ Municip	ality.	e. Election Su	m to Date
(800) 275-8777							, .	\$	2,118.00
e Alamata Cada	g. Form of Payment	h. Purpose Code	i Date	(mm/dd/yyyy)	i A	nount	k. Re	quired Remari	ŕ
1	Debit Card	K			\$	290.00	STA		
1	Debit Card	K		9/28/2021	\$		STAI		
			U	9/20/2021	Ψ	110.00	SIAI		652.69
5. Total only thi								\$	653.68
	CRO-1310 Pages								
	n line 13a of Detailed S					m 11.1		\$	9,721.99
	n line 13b of Detailed S n line 13c of Detailed S						mm)		
7. Purpose Co		expenditure code						ng promotos	
A* - Media	B* - Printin F* - Equipme		2:2::: 1: 12:11:	undraising		*: .1.11 11		ner Candidate	
E - Salaries	New York Commission	litical Party	TIVING U			Public Office			
I - Postage	J - Penaltie	S	K* - C)ffice Expenses		Q* - D o	matio	n to Legal Exp	pense Fund
O* Other	e detailed explanatio	e in proposition is	iouba f	ista <i>a</i> s					
CRO-1310	en asmedale insumino			ard of Elections				D	ecember 2009

	Amendm	ent	
Page1_ of1_	☐ Yes	X	No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

Ориона	optional form used to report NC Non-Media Expenditures of \$30 or less.								
COMMITTEE TO ELECT BOB BYRD									
		BOB B I KD		***************************************					
	Information								
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks			
☐ Add ☐ Remo	ve 1	Electric Funds Tran	CK	10/04/2021	\$ 22.07	DONATION PROCESSING FEE			
☐ Add ☐ Remo	ve 1	Draft	K	09/30/2021	\$ 5.00	BANK FEE			
☐ Add ☐ Remo	ve 1	Draft	K	09/30/2021	\$ 39.50	EXCESS TRANSACTION FEES			
☐ Add ☐ Remo	1 ve	Draft	K	10/01/2021	\$ 5.00	BANK FEE			
☐ Add ☐ Remo	ve 1	Debit Card	K	09/27/2021	\$ 13.39	OFFICE DEPOT			
☐ Add ☐ Remo	ve 1	Debit Card	K	09/28/2021	\$ 3.04	LABELS			
Add Remo	ve 1	Debit Card	K	09/28/2021	\$ 4.26	MAILING LABELS			
Add Remo	ve l	Electric Funds Tran	С	10/12/2021	\$ 41.22	DONATION PROCESSING			
4. Total	only this Page				\$	133.48			
5. Total	of ALL CRO-1	315 Pages f Detailed Summary Pa	ge CRO-1100)		\$	133.48			
6. Purp		letailed expenditu				Karting and outside some			
E - Sa		- Printing - Equipment	C* - Fundra G - Political		o Another Car	ndidate lie Office Expenses			
12 Pos	1 - 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	D.,.
III-MIRU	Comminuments	Pg

			Amendment			
1	of	1	☐ Yes	X 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.

3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) NC DEMOCRATIC PARTY	b. Type of Con Individual Candidate Party	move fributor = #******	c. Com	ments		
220 Hillsborough Street RALEIGH, NC 27602 (919) 821-2777	PAC Referendum Other Rece	ipt Source	d. Dection Sun \$		500.00	
Description VOTEBUILDER DATABASE ACCESS	aasi sii ahendus ilki niesii indeese	f. Date (mm/dd 10/01/202		g. rair iv \$	larket Amoun 500.00	
		-		\$	T	
				\$		
4. Total only this Page			\$		500.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page	CRO-1100)		\$		500.00	

CRO-1510

NC State Board of Elections

December 2007

Outstanding	Loans
-------------	-------

				Amendment	
Pg _	1	of	1	☐ Yes	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applica COMMITTEE TO ELECT BOB BYRD	(ble)			2. ID Num	ber alla la la casa di manda
3. Lender Information a. Full Name, Mailing Address & Phone	☐ Ad	d 🔲 Rem Job Title/Prof		d. Comme	
(include city, state, & zip)		TIRED		u. Comme	
ROBERT E BYRD 2826 CHARLOTTE LANE				e. Start Da	ite (mm/dd/yyyy)
BURLINGTON, NC 27215 (336) 584-7302		c. Employer's Name/Specific Field RETIRED		08/12/2021 f. End Date (mm/dd/yyyy)	
0.00%		\$	10,000.00	\$	10,000.00
k. Full Name of Lending Institution				l. Loan Nu	mber
4. Poiatroniy this Page				\$	10,000.00
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Samma)	ry Page CRO-11	00)		\$	10,000.00

CRO-1430

NC State Board of Elections

December 2007