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**Independent Expenditure Report Cover**

This form should be accompanied by forms CRO-2210B and CRO-2210C. For statutory guidance, please refer to N.C.G.S. § 163-278.12 & 163.278.6(9a).

Amendment  
 Yes  No

<b>1. Reporting Entity Information</b>	
Full Name of Entity Making Disbursement Down Home NC	e. Federal ID Number (if applicable) 83-1236736
Mailing Address (Include City, State and Zip) and Phone Number PO Box 41262 Greensboro, NC 27404 (704) 502-8251	f. Date Filled 10/31/2022
g. Employer's Name or Principal Place of Business h. Occupation	
d. Entity Type (Check One)	
<input type="checkbox"/> Individual <input type="checkbox"/> Other Organization <input checked="" type="checkbox"/> Nonprofit Organization	
c. Report Type	
<input type="checkbox"/> Initial <input type="checkbox"/> 48 Hour Quarterly: <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-Annual: <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Other (Specify)	
2. Report Year 2022	3. Period Start Date (mm/dd/yyyy) 09/15/2022
4. Period End Date (mm/dd/yyyy) 10/22/2022	
<b>5. Custodian of Books</b>	
a. Full Name of Entity's Custodian of Books and Accounts Myzanda J Harper-Penn	
b. Mailing Address (Include City, State and Zip) and Phone Number 2423 Shepherd Valley St Raleigh, NC 27610-1976	
c. Employer's Name or Principal Place of Business Harper Business Solutions	
d. Occupation Accountant	
6. Total Donations ALL Pages \$0.00	
7. Total Expenditures ALL Pages \$226,948.32	
<b>CERTIFICATION</b>	
I certify that this statement is complete, true and correct.	
TODD M ZIMMER	Todd M. Zimmer
Printed Name of Signer	Signature
	Date 10/31/2022

### Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
Ballot Number	Incurred Date (mm/dd/yyyy)	Commencement Start Date	Purpose (including title(s) of communication(s))	Amount	Office Sought	House	Senate	County/District	Co. /Municipal Office
34	09/22/2022	09/22/2022	GOTV-Print Media	\$38.35		<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Full Name, Mailing Address (include city, state, and zip), and phone number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
Candidate Full Name					Office Sought				
Angela King / County Commission					<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Co./Municipal Office				
Amount					County/District				
Candidate Full Name					Office Sought				
					<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office				
Amount					County/District				
Referendum Name					Date				
					<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County				
Ballot Number: 35 Incurred Date (mm/dd/yyyy): 09/22/2022 Commencement Start Date: 09/22/2022 Purpose (including title(s) of communication(s)): GOTV-Print Media Amount: \$38.35									
Full Name, Mailing Address (include city, state, and zip), and phone number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
Candidate Full Name					Office Sought				
Gary Childers / School Board					<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Co./Municipal Office				
Amount					County/District				
Candidate Full Name					Office Sought				
					<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office				
Amount					County/District				
Referendum Name					Date				
					<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County				

2. Total Expenditures: This Page	(Sum all the entries on this page)	76.70
3. Total Expenditures: All Pages	(Sum all the entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

## 1. Expenditure Information

Item Number	09/22/2022	Communication Start Date	09/22/2022	Purpose (including title(s) of communication(s))	Amount
36				GOTV - Print Media	\$38.35
<p><b>a. Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b>                  BareFoot Press                  731 Pershing Rd                  Raleigh, NC 27608-2711</p>					
<p><b>Candidate Full Name</b>                  Jay Fenwick / School Board</p>		<p><b>Amount</b>                  \$38.35</p>	<p><b>Office Sought</b>  <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input checked="" type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office</p>	<p><b>District</b>                  _____</p>	<p><b>County/District</b>                  _____ Co., Watauga</p>
<p><b>Candidate Full Name</b></p>		<p><b>Amount</b></p>	<p><b>Office Sought</b>  <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office</p>	<p><b>District</b>                  _____</p>	<p><b>County/District</b>                  _____ Co., _____</p>
<p><b>Referendum Name</b></p>		<p><b>Amount</b></p>	<p><b>Level</b>  <input type="checkbox"/> Support  <input type="checkbox"/> Oppose</p>	<p><b>Date</b></p>	<p><b>County</b>  <input type="checkbox"/> State  <input type="checkbox"/> Municipality  <input type="checkbox"/> County</p>
Item Number	09/22/2022	Communication Start Date	09/22/2022	Purpose (including title(s) of communication(s))	Amount
37				GOTV - Print Media	\$38.35
<p><b>a. Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b>                  BareFoot Press                  731 Pershing Rd                  Raleigh, NC 27608-2711</p>					
<p><b>Candidate Full Name</b>                  Marshall Ashcroft / School Board</p>		<p><b>Amount</b>                  \$38.35</p>	<p><b>Office Sought</b>  <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input checked="" type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office</p>	<p><b>District</b>                  _____</p>	<p><b>County/District</b>                  _____ Co., Watauga</p>
<p><b>Candidate Full Name</b></p>		<p><b>Amount</b></p>	<p><b>Office Sought</b>  <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office</p>	<p><b>District</b>                  _____</p>	<p><b>County/District</b>                  _____ Co., _____</p>
<p><b>Referendum Name</b></p>		<p><b>Amount</b></p>	<p><b>Level</b>  <input type="checkbox"/> Support  <input type="checkbox"/> Oppose</p>	<p><b>Date</b></p>	<p><b>County</b>  <input type="checkbox"/> State  <input type="checkbox"/> Municipality  <input type="checkbox"/> County</p>

2. Total Expenditures THIS Page	(Sum all the entries on this page)	76.70
3. Total Expenditures ALL Pages	(Sum all the entries on all receipt pages)	226,948.32

**Independent Expenditure Report Cover**

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information		Candidate/Full Name		Office Sought		Amount		Purpose (including title(s) of communication(s))	
Item Number	Date (mm/dd/yyyy)	Support	County	House	Senate	Amount	Co.	Start Date	Level
21	09/22/2022	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Craven	<input type="checkbox"/> House <input type="checkbox"/> Other Office:	<input type="checkbox"/> Senate <input type="checkbox"/> Other Office:	\$46.14	Craven	09/22/2022	County
Full Name, Mailing Address (include city, state, and zip) & Phone Number		Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711		Victor Dove / School Board		Victor Dove / School Board		GOTV-Print Media	
Candidate/Full Name		Barefoot Press		Victor Dove / School Board		Victor Dove / School Board		GOTV-Print Media	
Amount		\$46.14		\$46.14		\$46.14		\$46.14	
Date		09/22/2022		09/22/2022		09/22/2022		09/22/2022	
Level		County		County		County		County	
Support/Oppose		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Total Expenditures THIS PAGE		Sum all the entries on this page		Sum all the entries on this page		Sum all the entries on this page		Sum all the entries on this page	
Total Expenditures ALL PAGES		Sum all the entries on all receipt pages		Sum all the entries on all receipt pages		Sum all the entries on all receipt pages		Sum all the entries on all receipt pages	

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

## 1. Expenditure Information

Item Number 23	b. Incurred Date (mm/dd/yyyy) 09/22/2022	c. Communication Start Date 09/22/2022	d. Purpose (including title(s) of communication(s)) GOTV-Print Media	f. Amount \$46.14
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711				
Candidate Full Name Loren Gatling Wilson / School Board	Amount \$46.14	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co. Craven	
Candidate Full Name	Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co.	
Referendum Name		Date	Level <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipally <input type="checkbox"/> County	
Item Number 8	b. Incurred Date (mm/dd/yyyy) 09/22/2022	c. Communication Start Date 09/22/2022	d. Purpose (including title(s) of communication(s)) GOTV-Print Media	f. Amount \$47.93
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711				
Candidate Full Name Polly Jones / School Board	Amount \$47.93	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co. Ashe	
Candidate Full Name	Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co.	
Referendum Name		Date	Level <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipally <input type="checkbox"/> County	

2. Total Expenditures THIS Page	(Sum all the "f" entries on this page)	94.07
3. Total Expenditures ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Communication(s)	Amount	Office Sought	Support	Oppose	Level	Amount
9	09/22/2022	09/22/2022	Govt-Print Media	\$47.93	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality	\$47.93
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
f. Purpose (including title(s) of communication(s)) Govt-Print Media									
10	09/22/2022	09/22/2022	Govt-Print Media	\$47.93	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality	\$47.93
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
f. Purpose (including title(s) of communication(s)) Govt-Print Media									
g. Candidate Full Name / Amount Beth Sorrell / County Commission / \$47.93 <input checked="" type="checkbox"/> Support / <input type="checkbox"/> Oppose <input type="checkbox"/> House / <input type="checkbox"/> Senate / <input type="checkbox"/> Other Office <input type="checkbox"/> Support / <input type="checkbox"/> Oppose									
h. Candidate Full Name / Amount Beth Sorrell / County Commission / \$47.93 <input checked="" type="checkbox"/> Support / <input type="checkbox"/> Oppose <input type="checkbox"/> House / <input type="checkbox"/> Senate / <input type="checkbox"/> Other Office <input type="checkbox"/> Support / <input type="checkbox"/> Oppose									
i. Referendum Name / Amount / \$47.93 <input type="checkbox"/> Support / <input type="checkbox"/> Oppose									

2. Total Expenditures: THIS Page	(Sum all the "f" entries on this page)	95.86
3. Total Expenditures: ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

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Expenditure Information	
a. Item Number: 7	b. Incurred Date (mm/dd/yyyy): 09/22/2022
c. Communication Start Date: 09/22/2022	d. Purpose (including title(s) of communication(s)): GOTV-Print Media
e. Full Name, Mailing Address (include city, state, and zip), & Phone Number: Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711	f. Amount: \$86.28

Candidate Full Name	Amount	Office Sought	Support	Oppose	House	Senate	District	Co./Municipal Office	County/District	Co.
Ben Hasey ID 93	\$86.28	<input checked="" type="checkbox"/> House <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose							
Candidate Full Name	Amount	Office Sought	Support	Oppose	House	Senate	District	Co./Municipal Office	County/District	Co.
		<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Support <input type="checkbox"/> Oppose							
Referendum Name	Amount	Level	Support	Oppose	State	Municipality	County			
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		<input type="checkbox"/> State <input type="checkbox"/> Municipality		<input type="checkbox"/> County			

a. Item Number: 14	b. Incurred Date (mm/dd/yyyy): 09/22/2022	c. Communication Start Date: 09/22/2022	d. Purpose (including title(s) of communication(s)): GOTV-Print Media	e. Amount: \$118.69
f. Full Name, Mailing Address (include city, state, and zip), & Phone Number: Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711				

Candidate Full Name	Amount	Office Sought	Support	Oppose	House	Senate	District	Co./Municipal Office	County/District	Co.
Juanita Beger-Allen District Court	\$118.69	<input checked="" type="checkbox"/> District Court <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose							Cabarrus
Candidate Full Name	Amount	Office Sought	Support	Oppose	House	Senate	District	Co./Municipal Office	County/District	Co.
		<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Support <input type="checkbox"/> Oppose							
Referendum Name	Amount	Level	Support	Oppose	State	Municipality	County			
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		<input type="checkbox"/> State <input type="checkbox"/> Municipality		<input type="checkbox"/> County			

2. Total Expenditures THIS Page	(Sum all the "f" entries on this page)	204.97
3. Total Expenditures ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

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Independent Expenditure Information										
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title of communication(s))	Amount	Candidate Full Name	Office Sought	House	Senate	Other Office	County/District
15	09/22/2022	09/22/2022	Govt-Print Media	\$118.69	Darren Jackson Court of Appeals	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Other Office: Court of Appeals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Co.
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number: Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711										
16	09/22/2022	09/22/2022	Govt-Print Media	\$118.69	Lynn Shue / County Commission	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Co. Cabarrus
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number: Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711										
f. Full Name, Mailing Address (include city, state, and zip) & Phone Number: Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711										

2. Total Expenditures THIS Page	(Sum all the "f" entries on this page)	237.38
3. Total Expenditures ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32



# Independent Expenditure Report Cover

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Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Offices Sought	Amount	Candidate Full Name	Referendum Name	Level	Date	Purpose (including title(s) of communication(s))
17	09/22/2022	09/22/2022	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office: _____ <input type="checkbox"/> Office Sought: _____	\$118.69	Pam Escobar / School Board		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		GOTV-Print Media
Full Name Mailing Address (include city, state, and zip) & Phone Number		Candidate Full Name		Amount					
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711		Pam Escobar / School Board		\$118.69					
Full Name Mailing Address (include city, state, and zip) & Phone Number		Candidate Full Name		Amount					
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711		Pam Escobar / School Board		\$118.69					
Full Name Mailing Address (include city, state, and zip) & Phone Number		Candidate Full Name		Amount					
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711		Pam Escobar / School Board		\$118.69					

2. Total Expenditures THIS Page	(Sum all the "If entries on this page)	237.38
3. Total Expenditures ALL Pages	(Sum all the "If entries on all receipt pages)	226,948.32

**Independent Expenditure Report Cover**

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-3520.

Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) of communication(s))	Amount	Candidate/Full Name	Office Sought	Level	County/District	Amount
19	09/22/2022	09/22/2022	GOTV-Print Media	\$118.69	Sam Treadway / School Board	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Co./Municipal Office <input type="checkbox"/> County	Cabarrus	\$118.69
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
f. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
20	09/22/2022	09/22/2022	GOTV-Print Media	\$118.69	Brian Floyd / School Board	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Co./Municipal Office <input type="checkbox"/> County	Cabarrus	\$118.69
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
f. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									

2. Total Expenditures THIS Page	(Sum all the figures on this page)	237.38
3. Total Expenditures ALL Pages	(Sum all the figures on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

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### Expenditure Information

Item Number:	31	Incurred Date (mm/dd/yyyy)	09/22/2022	Communication Start Date	09/22/2022	Purpose (Including title(s) of communication(s))	Govt-Print Media	Amount	\$232.00
Full Name, Mailing Address (include city, state, and zip) & Phone Number									
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
Candidate Full Name		Amount	\$232.00	Office Sought	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office	County/District	Co.		
Candidate Full Name		Amount		Office Sought	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office	County/District	Co.		
Referendum Name				Date		Level	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality	<input type="checkbox"/> County

Item Number	32	Incurred Date (mm/dd/yyyy)	09/22/2022	Communication Start Date	09/22/2022	Purpose (Including title(s) of communication(s))	Govt-Print Media	Amount	\$232.00
Full Name, Mailing Address (include city, state, and zip) & Phone Number									
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
Candidate Full Name	Hollyann Rogers / County Commission	Amount	\$232.00	Office Sought	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input checked="" type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office	County/District			
Candidate Full Name		Amount		Office Sought	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office	County/District	Co.		
Referendum Name				Date		Level	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality	<input type="checkbox"/> County

Total Expenditures THIS Page	(Sum all the 11 entries on this page)	464.00
Total Expenditures ALL Pages	(Sum all the 11 entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

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Expenditure Information										
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) or communication(s))	Amount	Office Sought	House	Senate	District	Co./Municipal Office	Co./Person
33	09/22/2022	09/22/2022	GOTV-Print Media	\$232.00		<input checked="" type="checkbox"/>	<input type="checkbox"/>			
<b>a. Full Name, Mailing Address (include city, state, and zip), Phone Number</b> Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711										
<b>Candidate Full Name</b> Keith Day / Sheriff										
<b>Candidate Full Name</b> Amount: <input type="checkbox"/> Support <input type="checkbox"/> Oppose										
<b>Referendum Name</b> Amount: <input type="checkbox"/> Support <input type="checkbox"/> Oppose										
<b>Referendum Name</b> Date: <input type="checkbox"/> Support <input type="checkbox"/> Oppose										
Level: <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County										
26	09/22/2022	09/22/2022	GOTV-Print Media	\$268.43		<input checked="" type="checkbox"/>	<input type="checkbox"/>			
<b>b. Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b> Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711										
<b>Candidate Full Name</b> Evelyn Sanders / County Commission										
<b>Candidate Full Name</b> Amount: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
<b>Referendum Name</b> Amount: <input type="checkbox"/> Support <input type="checkbox"/> Oppose										
<b>Referendum Name</b> Date: <input type="checkbox"/> Support <input type="checkbox"/> Oppose										
Level: <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County										

2. Total Expenditures THIS Page	(Sum all the "I" entries on this page)	500.43
3. Total Expenditures ALL Pages	(Sum all the "I" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2620.

Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Communication End Date	Amount	Office Sought	County/District	Level	Support/Oppose	Amount
27	09/22/2022	09/22/2022		\$268.43	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	Johnston	County	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	\$268.43
a. Full Name, Mailing Address (include city, state, and zip), & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
b. Purpose (including title(s) or communication(s)) GOTV-Print Media									
28	09/22/2022	09/22/2022		\$268.43	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	Johnston	County	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	\$268.43
a. Full Name, Mailing Address (include city, state, and zip), & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
b. Purpose (including title(s) or communication(s)) GOTV-Print Media									
c. Candidate Full Name Wendy Ella Kay HD 28									
d. Amount \$268.43									
e. Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office									
f. County/District Johnston									
g. Support/Oppose <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose									
h. Level County									
i. Amount \$268.43									

2. Total Expenditures THIS Page	(Sum all the "f" entries on this page)	536.86
3. Total Expenditures ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including (ies) or communication(s))	e. Amount	f. Candidate Full Name	g. Office Sought	h. Senate District	i. Co./Municipal Office	j. County/District
29	09/22/2022	09/22/2022	GOTV-Print Media	\$268.43	Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		<input type="checkbox"/> House <input type="checkbox"/> Other Office	
					Candidate Full Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office District: _____ County/District: _____				
					Referendum Name: _____ Date: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality				
30	09/22/2022	09/22/2022	GOTV-Print Media	\$268.43	Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		<input type="checkbox"/> House <input type="checkbox"/> Other Office	
					Candidate Full Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office District: _____ County/District: _____				
					Referendum Name: _____ Date: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality				

2. Total Expenditures THIS Page	(Sum all the "f" entries on this page)	536.86
3. Total Expenditures ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) or communication(s))	e. Amount	f. Candidate Full Name	g. Office Sought	h. Support / Oppose	i. Date	j. Level
11	09/22/2022	09/22/2022	GOTV-Print Media	\$274.18					
<b>e. Full Name, Mailing Address (include city, state, and zip), &amp; Phone Number:</b> Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
<b>g. Candidate Full Name:</b> Diamond Staton-Williams HD 73									
<b>h. Support / Oppose:</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose									
<b>i. Date:</b> _____									
<b>j. Level:</b> <input type="checkbox"/> State <input type="checkbox"/> Municipality									
12	09/22/2022	09/22/2022	GOTV-Print Media	\$274.18					
<b>e. Full Name, Mailing Address (include city, state, and zip), &amp; Phone Number:</b> Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711									
<b>g. Candidate Full Name:</b> Klesha Sandidge SD 34									
<b>h. Support / Oppose:</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose									
<b>i. Date:</b> _____									
<b>j. Level:</b> <input type="checkbox"/> State <input type="checkbox"/> Municipality									

2. Total Expenditures: THIS Page	(Sum all the "f" entries on this page)	548.36
3. Total Expenditures: ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

**Independent Expenditure Report Cover**

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

**Expenditure Information**

<b>a. Item Number</b>	<b>b. Incurred Date (mm/dd/yyyy)</b>	<b>c. Communication Start Date</b>	<b>d. Purpose (including title(s) of communication(s))</b>	<b>e. Amount</b>
13	09/22/2022	09/22/2022	GOV-Print Media	\$274.18
<b>e. Full Name, Mailing Address (include city, state, and zip), &amp; Phone Number</b>				
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711				
<b>Candidate/Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>Level</b>	<b>County</b>
Sabrina Berry / County Commission	\$274.18	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Co./Municipal Office	Co. Cabarrus
<b>Candidate/Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>Level</b>	<b>County</b>
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input type="checkbox"/> Co./Municipal Office	Co.
<b>Referendum Name</b>		<b>Date</b>	<b>Level</b>	<b>County</b>
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality
<b>a. Item Number</b>	<b>b. Incurred Date (mm/dd/yyyy)</b>	<b>c. Communication Start Date</b>	<b>d. Purpose (including title(s) of communication(s))</b>	<b>e. Amount</b>
24	09/22/2022	09/22/2022	GOV-Print Media	\$511.30
<b>e. Full Name, Mailing Address (include city, state, and zip), &amp; Phone Number</b>				
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711				
<b>Candidate/Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>Level</b>	<b>County</b>
Mary Wills Bode SD 34	\$511.30	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input type="checkbox"/> Co./Municipal Office	Co.
<b>Candidate/Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>Level</b>	<b>County</b>
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office	<input type="checkbox"/> Co./Municipal Office	Co.
<b>Referendum Name</b>		<b>Date</b>	<b>Level</b>	<b>County</b>
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality

<b>2. Total Expenditures THIS Page</b>	(Sum all the "f" entries on this page)	785.48
<b>3. Total Expenditures ALL Pages</b>	(Sum all the "f" entries on all receipt pages)	226,948.32



Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2550.

Expenditure Information

1. Item Number 25	2. Incurred Date (mm/dd/yyyy) 09/22/2022	3. Campaign Start Date 09/22/2022	4. Purpose (including title(s) of communication(s)) GOTV-Print Media	5. Amount \$511.30
6. Full Name, Mailing Address (include city, state, and zip), & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711				
Candidate Full Name Robert Fountain / Sheriff		Amount \$511.30	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	County/District Co. Granville
Candidate Full Name		Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	County/District Co. _____
Referendum Name		Amount	Date: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Level <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality
7. Item Number 5	8. Incurred Date (mm/dd/yyyy) 09/22/2022	9. Communication Start Date 09/22/2022	10. Purpose (including title(s) of communication(s)) GOTV-Print Media	11. Amount \$543.25
12. Full Name, Mailing Address (include city, state, and zip), & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711				
Candidate Full Name Sean Swing SD 25		Amount \$543.25	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	County/District Co. _____
Candidate Full Name		Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	County/District Co. _____
Referendum Name		Amount	Date: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Level <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality

2. Total Expenditures THIS Page	(Sum of all entries on this page)	1,054.55
3. Total Expenditures ALL Pages	(Sum of all entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information		Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) of communication(s))	Amount
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711		6	09/22/2022	09/22/2022	GOTV-Print Media	\$543.25
<b>Candidate Full Name</b> Anthony Pierce / County Commission	<b>Amount</b> \$543.25	<b>Office Sought</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office: _____	<b>District</b> _____ <b>Co.</b> Alamance <b>County/District</b> _____	<b>Support</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<b>Referendum Name</b> _____	<b>Level</b> <input type="checkbox"/> State <input type="checkbox"/> County
<b>Candidate Full Name</b> Ron Osborne HD-64	<b>Amount</b> \$614.83	<b>Office Sought</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office: _____	<b>District</b> _____ <b>Co.</b> _____ <b>County/District</b> _____	<b>Support</b> <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<b>Referendum Name</b> _____	<b>Level</b> <input type="checkbox"/> State <input type="checkbox"/> Municipality
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711		1	09/22/2022	09/22/2022	GOTV-Print Media	\$614.83
<b>Candidate Full Name</b> Ron Osborne HD-64	<b>Amount</b> \$614.83	<b>Office Sought</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office: _____	<b>District</b> _____ <b>Co.</b> _____ <b>County/District</b> _____	<b>Support</b> <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<b>Referendum Name</b> _____	<b>Level</b> <input type="checkbox"/> State <input type="checkbox"/> Municipality

<b>2. Total Expenditures THIS Page</b> (Sum all the "If entries on this page")	1,158.08
<b>3. Total Expenditures ALL Pages</b> (Sum all the "If entries on all receipt pages")	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRC-2520.

Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) of communication(s))	Amount	Office Sought	House	Senate	District	County/District
4	09/22/2022	09/22/2022	GOTV-Print Media	\$645.51	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office		Co.
Candidate Full Name				Amount	Office Sought	House	Senate	District	Co.
Ricky Rurtado ID 63				\$645.51	<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> House <input type="checkbox"/> Co./Municipal Office	<input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office		Co.
Referendum Name				Amount	Level	Support	Oppose		County
					<input type="checkbox"/> State <input type="checkbox"/> Municipality	<input type="checkbox"/> Support <input type="checkbox"/> Oppose			County
Candidate Full Name				Amount	Office Sought	House	Senate	District	Co.
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711					<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> House <input type="checkbox"/> Co./Municipal Office	<input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office		Co.
Referendum Name				Amount	Level	Support	Oppose		County
					<input type="checkbox"/> State <input type="checkbox"/> Municipality	<input type="checkbox"/> Support <input type="checkbox"/> Oppose			County
a. Item Number: 2      b. Incurred Date (mm/dd/yyyy): 09/22/2022      c. Communication Start Date: 09/22/2022      d. Purpose (including title(s) of communication(s)): GOTV-Print Media      e. Amount: \$717.09									
Candidate Full Name				Amount	Office Sought	House	Senate	District	Co.
Kelly White / Sheriff				\$717.09	<input checked="" type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> House <input type="checkbox"/> Co./Municipal Office	<input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office		Co.
Candidate Full Name				Amount	Office Sought	House	Senate	District	Co.
Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711					<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> House <input type="checkbox"/> Co./Municipal Office	<input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office		Co.
Referendum Name				Amount	Level	Support	Oppose		County
					<input type="checkbox"/> State <input type="checkbox"/> Municipality	<input type="checkbox"/> Support <input type="checkbox"/> Oppose			County

2. Total Expenditures THIS Page	(Sum all the "f" entries on this page)	1,362.60
3. Total Expenditures ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

**Independent Expenditure Report Cover**

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information										
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) of communication(s))	Amount	Office Sought	House	Senate	District	Co./Municipal Office	Co./Municipality
3	09/22/2022	09/22/2022	GOTV-Print Media	\$717.09	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Senate		<input checked="" type="checkbox"/> Co./Municipal Office	
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number Barefoot Press 731 Pershing Rd Raleigh, NC 27608-2711										
Candidate Full Name: Seneca Rogers / School Board Amount: \$717.09 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office Level: <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County										
Referendum Name: _____ Date: _____ Level: <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County										
38	10/14/2022	10/14/2022	GOTV - Internet Ads	\$200.00	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Senate		<input checked="" type="checkbox"/> Co./Municipal Office	
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number BenBassat Digital Consultants 1852 Banking St # 29510 Greensboro, NC 27408-7222										
Candidate Full Name: Seneca Rogers / School Board Amount: \$200.00 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office Level: <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County										
Referendum Name: _____ Date: _____ Level: <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County										

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (Including Title of Communication(s))	Amount	Office Sought	House	Senate	District	County/District
39	10/13/2022	10/13/2022	GOTV - Print Media	\$187.00					
<b>6. Full Name (Mailing Address (include city, state, and zip)) &amp; Phone Number</b> BHM NC Newspapers 3001 S Elm Eugene St Greensboro, NC 27406-4448									
<b>Candidate Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>House</b>	<b>Senate</b>	<b>District</b>	<b>County/District</b>	<b>Co.</b>	<b>Co.</b>	<b>Co.</b>
Kiesha Sandidge SD 34	\$187.00	<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Senate <input type="checkbox"/> Other Office					
<b>Candidate Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>House</b>	<b>Senate</b>	<b>District</b>	<b>County/District</b>	<b>Co.</b>	<b>Co.</b>	<b>Co.</b>
		<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Senate <input type="checkbox"/> Other Office					
<b>Referendum Name</b>	<b>Date</b>	<b>Level</b>	<input type="checkbox"/> Support <input type="checkbox"/> Oppose				<input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County		
40	10/13/2022	10/13/2022	GOTV - Print Media	\$187.00					
<b>6. Full Name (Mailing Address (include city, state, and zip)) &amp; Phone Number</b> BHM NC Newspapers 3001 S Elm Eugene St Greensboro, NC 27406-4448									
<b>Candidate Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>House</b>	<b>Senate</b>	<b>District</b>	<b>County/District</b>	<b>Co.</b>	<b>Co.</b>	<b>Co.</b>
Diamond Stacon-Williams HD 73	\$187.00	<input checked="" type="checkbox"/> House <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Senate <input type="checkbox"/> Other Office					
<b>Candidate Full Name</b>	<b>Amount</b>	<b>Office Sought</b>	<b>House</b>	<b>Senate</b>	<b>District</b>	<b>County/District</b>	<b>Co.</b>	<b>Co.</b>	<b>Co.</b>
		<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Senate <input type="checkbox"/> Other Office					
<b>Referendum Name</b>	<b>Date</b>	<b>Level</b>	<input type="checkbox"/> Support <input type="checkbox"/> Oppose				<input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County		

<b>2. Total Expenditures THIS Page</b>	(Sum all the "r" entries on this page)	374.00
<b>3. Total Expenditures ALL Pages</b>	(Sum all the "r" entries on all report pages)	226,948.32

**Independent Expenditure Report Cover**

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

**Expenditure Information**

41	10/19/2022	10/19/2022	GOTV - Print Media	\$249.33
<p>Full Name (Mailing Address (include city, state and zip) &amp; Phone Number)</p> <p>BH4 NC Newspapers 3001 S Elm Eugene St Greensboro, NC 27406-4448</p>				
Candidate/Full Name	Amount	Office Sought	County/District	Co.
Sabrina Berry / County Commission	\$249.33	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Co./Municipal Office	Co. Cabarrus
Candidate/Full Name	Amount	Office Sought	County/District	Co.
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	<input type="checkbox"/> Co./Municipal Office	
Referendum Name		Date	Level	
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality
42	10/19/2022	10/19/2022	GOTV - Print Media	\$249.33
<p>Full Name (Mailing Address (include city, state, and zip) &amp; Phone Number)</p> <p>BH4 NC Newspapers 3001 S Elm Eugene St Greensboro, NC 27406-4448</p>				
Candidate/Full Name	Amount	Office Sought	County/District	Co.
Lynn Snae / County Commission	\$249.33	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Co./Municipal Office	Co. Cabarrus
Candidate/Full Name	Amount	Office Sought	County/District	Co.
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	<input type="checkbox"/> Co./Municipal Office	
Referendum Name		Date	Level	
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality

2. Total Expenditures THIS Page	(Sum all the entries on this page)	498.66
3. Total Expenditures ALL Pages	(Sum all the entries on all receipt pages)	225,948.32

**Independent Expenditure Report Cover**

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

**Expenditure Information**

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) or communication(s))	e. Amount
43	10/19/2022	10/19/2022	GOTV - Print Media	\$249.33

f. Full Name, Mailing Address (include city, state, and zip), & Phone Number  
 BRM NC Newspapers  
 3001 S Elm Eugene St  
 Greensboro, NC 27406-4448

Candidate/Full Name	Amount	Office Sought	Level
Juanita Beyer-Allen District Court	\$249.33	<input type="checkbox"/> House <input checked="" type="checkbox"/> Other Office: District Court	<input type="checkbox"/> Senate District: Cabarrus Co. <input type="checkbox"/> Co./Municipal Office
Candidate/Full Name	Amount	Office Sought	Level
		<input type="checkbox"/> House <input type="checkbox"/> Other Office:	<input type="checkbox"/> Senate District: Co. <input type="checkbox"/> Co./Municipal Office
Referendum Name		Date	Level
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County

e. Item Number	f. Incurred Date (mm/dd/yyyy)	g. Communication Start Date	h. Purpose (including title(s) or communication(s))	i. Amount
44	10/14/2022	10/14/2022	GOTV-Door-to-Door	\$205,967.38

f. Full Name, Mailing Address (include city, state, and zip), & Phone Number  
 Down Home NC  
 PO Box 41262  
 Greensboro, NC 27404-1262

Candidate/Full Name	Amount	Office Sought	Level
		<input type="checkbox"/> House <input type="checkbox"/> Other Office:	<input type="checkbox"/> Senate District: Co. <input type="checkbox"/> Co./Municipal Office
Candidate/Full Name	Amount	Office Sought	Level
		<input type="checkbox"/> House <input type="checkbox"/> Other Office:	<input type="checkbox"/> Senate District: Co. <input type="checkbox"/> Co./Municipal Office
Referendum Name		Date	Level
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County

2. Total Expenditures THIS Page (Sum all the "f" entries on this page) 205,216.71

3. Total Expenditures ALL Pages (Sum all the "f" entries on all receipt pages) 226,948.32

**Independent Expenditure Report Cover**

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2620.

Expenditure Information									
a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))	e. Amount	f. Candidate Full Name	g. Office Sought	h. Date	i. Level	j. County
45	09/17/2022	09/17/2022	GOV - Internet Ads	\$275.57					
<p><b>Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b>                  Facebook                  1 Hacker Way                  Menlo Park, CA 94025-1456</p>									
					<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office		<input type="checkbox"/> State <input type="checkbox"/> Municipality	
					<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office		<input type="checkbox"/> State <input type="checkbox"/> Municipality	
<p><b>Referendum Name</b></p>									
					<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office		<input type="checkbox"/> State <input type="checkbox"/> Municipality	
46	10/17/2022	10/17/2022	GOV - Internet Ads	\$83.73					
<p><b>Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b>                  Facebook                  1 Hacker Way                  Menlo Park, CA 94025-1456</p>									
					<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Co. Municipal Office <input type="checkbox"/> Other Office		<input type="checkbox"/> State <input type="checkbox"/> Municipality	
					<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office		<input type="checkbox"/> State <input type="checkbox"/> Municipality	
<p><b>Referendum Name</b></p>									
					<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office		<input type="checkbox"/> State <input type="checkbox"/> Municipality	

<b>2. Total Expenditures THIS Page</b>	(Sum all the "f" entries on this page)	359.30
<b>3. Total Expenditures ALL Pages</b>	(Sum all the "f" entries on all report pages)	226,948.32



Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Independent Expenditure Information									
a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))	e. Amount	f. Amount				
47	10/17/2022	10/17/2022	GOTV - Internet Ads	\$83.73	\$83.73				
<p><b>g. Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b>                  Facebook                  1 Hacker Way                  Menlo Park, CA 94025-1456</p>									
<b>Candidate Full Name</b>		<b>Office Sought</b>		<b>Amount</b>					
Ricky Hurtado HD 63		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office: _____		\$83.73		County/District: _____			
<b>Candidate Full Name</b>		<b>Office Sought</b>		<b>Amount</b>					
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office: _____				County/District: _____			
<b>Referendum Name</b>		<b>Date</b>		<b>Level</b>					
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipality					
48	10/17/2022	10/17/2022	GOTV - Internet Ads	\$83.73	\$83.73				
<p><b>g. Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b>                  Facebook                  1 Hacker Way                  Menlo Park, CA 94025-1456</p>									
<b>Candidate Full Name</b>		<b>Office Sought</b>		<b>Amount</b>					
Kelly White / Sheriff		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office: _____		\$83.73		County/District: _____			
<b>Candidate Full Name</b>		<b>Office Sought</b>		<b>Amount</b>					
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office: _____				County/District: _____			
<b>Referendum Name</b>		<b>Date</b>		<b>Level</b>					
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> Municipality					

2. Total Expenditures THIS Page	(Sum all the entries on this page)	167.46
3. Total Expenditures ALL Pages	(Sum all the entries on all receipt pages)	226,948.32

**Independent Expenditure Report Cover**

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
Item Number	Incurring Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) of communication(s))	Amount	Candidate/Full Name	Office Sought	Support	District	County/District
49	10/09/2022	10/09/2022	GOTV - Print Media	\$384.00	Kiesha Sandidge SD 34	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Other Office:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Full Name, Mailing Address (include city, state, and zip) & Phone Number GoodGuyssigns.com 1032 E Hillsborough Ave Tampa, FL 33604-7204									
50	10/09/2022	10/09/2022	GOTV - Print Media	\$384.00	Diamond Stacon-Williams HD 73	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Other Office:	<input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Full Name, Mailing Address (include city, state, and zip) & Phone Number GoodGuyssigns.com 1032 E Hillsborough Ave Tampa, FL 33604-7204									
Candidate/Full Name: Diamond Stacon-Williams Office Sought: Senate Support: Oppose District: County/District:									
Candidate/Full Name: Kiesha Sandidge SD 34 Office Sought: House Support: Support District: County/District:									
Referendum Name: _____ Date: _____ Support: <input type="checkbox"/> Support <input type="checkbox"/> Oppose State: <input type="checkbox"/> State <input type="checkbox"/> Municipality County: <input type="checkbox"/> County									

2. Total Expenditures THIS Page	(Sum all the "Amount" entries on this page)	768.00
3. Total Expenditures ALL Pages	(Sum all the "Amount" entries on all receipt pages)	226,548.32

**Independent Expenditure Report Cover**

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
Item Number	Ex. Incurred Date (mm/dd/yyyy)	Ex. Communication Start Date	Ex. Purpose (including title of communication(s))	Amount	Office Sought	Support	Oppose	County/District	Level
51	10/09/2022	10/09/2022	GOTV - Print Media	\$384.00		<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	Co. Cabarrus	<input type="checkbox"/> State <input type="checkbox"/> County
<b>e. Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b> GoodGuySSigns.com 1032 E Hillborough Ave Tampa, FL 33604-7204									
<b>Candidate Full Name</b> Sabrina Berry / County Commission									
<b>Candidate Full Name</b> [Blank]									
<b>Referendum Name</b> [Blank]									
52	10/12/2022	10/09/2022	GOTV - Print Media	\$192.75		<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	Co. Granville	<input type="checkbox"/> State <input type="checkbox"/> Municipality
<b>e. Full Name, Mailing Address (include city, state, and zip) &amp; Phone Number</b> GoodGuySSigns.com 1032 E Hillborough Ave Tampa, FL 33604-7204									
<b>Candidate Full Name</b> Robert Fountain / Sheriff									
<b>Candidate Full Name</b> [Blank]									
<b>Referendum Name</b> [Blank]									

2. Total Expenditures THIS Page	(Sum all line item entries on this page)	576.75
3. Total Expenditures ALL Pages	(Sum all line item entries on all receipt pages)	226,948.32

**Independent Expenditure Report Cover**

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2620.

1. Expenditure Information									
a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) or communication(s))	e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount	g. Office Sought	h. Support	i. Level	j. Amount
53	10/12/2022	10/09/2022	GOTV - Print Media	Goodguysesigns.com 1032 E Hillsborough Ave Tampa, FL 33604-7204	\$192.75	<input checked="" type="checkbox"/> House <input type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality	\$192.75
Candidate: Full Name: Mary Willis Bode SD 34									
Candidate: Full Name: [Blank]									
Referendum Name: [Blank]									
54	10/12/2022	10/12/2022	GOTV - Print Media	Lamar Media 105 -A E JJ Dr Greensboro, NC 27406	\$660.00	<input type="checkbox"/> House <input checked="" type="checkbox"/> Other Office	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality	\$660.00
Candidate: Full Name: Kelly White / Sheriff									
Candidate: Full Name: [Blank]									
Referendum Name: [Blank]									

2. Total Expenditures THIS Page	(Sum all the "f" entries on this page)	852.75
3. Total Expenditures ALL Pages	(Sum all the "f" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

## Expenditure Information

Item Number 55	Incurred Date (mm/dd/yyyy) 10/12/2022	Communication Start Date 10/12/2022	Purpose (including title(s) of communication(s)) COTV - Print Media	Amount \$660.00	
Full Name, Mailing Address (include city, state and zip) & Phone Number Lamar Media 105 -A E JJ Dr Greensboro, NC 27406					
Candidate Full Name Seneca Rogers / School Board	Amount \$660.00	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co. Alamance		
Candidate Full Name	Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co.		
Referendum Name		Date	Level <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County		
Item Number 56	Incurred Date (mm/dd/yyyy) 10/12/2022	Communication Start Date 10/12/2022	Purpose (including title(s) of communication(s)) COTV - Print Media	Amount \$660.00	
Full Name, Mailing Address (include city, state and zip) & Phone Number Lamar Media 105 -A E JJ Dr Greensboro, NC 27406					
Candidate Full Name Ricky Hurtado RD 63	Amount \$660.00	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co.		
Candidate Full Name	Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Other Office	County/District Co.		
Referendum Name		Date	Level <input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County		

2. Total Expenditures THIS Page	(Sum all the "Incurred" on this page)	1,320.00
3. Total Expenditures ALL Pages	(Sum all the "Incurred" on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) of communication(s))	Amount	Office Sought	House	Senate	District	County/District
57	10/12/2022	10/12/2022	GOTV - Print Media	\$660.00	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Senate <input type="checkbox"/> Other Office		Co. Johnston
Candidate Full Name: Lamar Media 105 -A E JJ Dr Greensboro, NC 27406									
Candidate Full Name: Evelyn Sanders / County Commission Amount: \$660.00 <input type="checkbox"/> Support <input type="checkbox"/> Oppose									
Candidate Full Name: [Blank] Amount: [Blank] <input type="checkbox"/> Support <input type="checkbox"/> Oppose									
Referendum Name: [Blank] Amount: [Blank] <input type="checkbox"/> Support <input type="checkbox"/> Oppose									
58	10/13/2022	10/13/2022	GOTV - Print Media	\$1,166.66	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> House <input type="checkbox"/> Other Office	<input type="checkbox"/> Senate <input type="checkbox"/> Other Office		Co. Johnston
Candidate Full Name: Lamar Media 105 -A E JJ Dr Greensboro, NC 27406									
Candidate Full Name: Keesha Sandidge SD 34 Amount: \$1,166.66 <input type="checkbox"/> Support <input type="checkbox"/> Oppose									
Candidate Full Name: [Blank] Amount: [Blank] <input type="checkbox"/> Support <input type="checkbox"/> Oppose									
Referendum Name: [Blank] Amount: [Blank] <input type="checkbox"/> Support <input type="checkbox"/> Oppose									

2. Total Expenditures THIS Page	(Sum all the "r" entries on this page)	1,826.66
3. Total Expenditures ALL Pages	(Sum all the "r" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

## Expenditure Information

a. Item Number: 59  
 b. Incurred Date (mm/dd/yyyy): 10/13/2022  
 c. Communication Start Date: 10/13/2022  
 d. Purpose (including title(s) of communication(s)): GOTV - Print Media  
 e. Amount: \$1,166.66

f. Full Name, Mailing Address (include city, state, and zip) & Phone Number:  
 Lamat Media  
 105 -A E JJ Dr  
 Greensboro, NC 27406

Candidate Full Name: Diamond Stacon-Williams HD 73  
 Amount: \$1,166.66  
 Office Sought:  House  Senate  District  Co./Municipal Office  
 Other Office:  County/District: \_\_\_\_\_ Co. \_\_\_\_\_

Candidate Full Name: \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Office Sought:  House  Senate  District  Co./Municipal Office  
 Other Office:  County/District: \_\_\_\_\_ Co. \_\_\_\_\_

Referendum Name: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Level:  Support  State  County  
 Oppose  Municipality

a. Item Number: 60  
 b. Incurred Date (mm/dd/yyyy): 10/13/2022  
 c. Communication Start Date: 10/13/2022  
 d. Purpose (including title(s) of communication(s)): GOTV - Print Media  
 e. Amount: \$1,166.67

f. Full Name, Mailing Address (include city, state, and zip) & Phone Number:  
 Lamat Media  
 105 -A E JJ Dr  
 Greensboro, NC 27406

Candidate Full Name: Sabrina Berry / County Commission  
 Amount: \$1,166.67  
 Office Sought:  House  Senate  District  Co./Municipal Office  
 Other Office:  County/District: \_\_\_\_\_ Co. Cabarrus

Candidate Full Name: \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Office Sought:  House  Senate  District  Co./Municipal Office  
 Other Office:  County/District: \_\_\_\_\_ Co. \_\_\_\_\_

Referendum Name: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Level:  Support  State  County  
 Oppose  Municipality

2. Total Expenditures THIS Page (Sum all the entries on this page) 2,333.33

3. Total Expenditures ALL Pages (Sum all the entries on all receipt pages) 226,948.32

**Independent Expenditure Report Cover**

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

Expenditure Information									
Item Number	Incurred Date (mm/dd/yyyy)	Communication Start Date	Purpose (including title(s) of communication(s))	Amount	Office Sought	House	Senate	District	County/District
61	10/19/2022	10/19/2022	Govt - Print Media	\$160.00					
<p><b>e. Full Name, Mailing Address (include city, state, and zip), &amp; Phone Number</b>                      Oxford Public Ledger                      200 W Spring St                      Oxford, NC 27565-3247</p>									
<p><b>6. Candidate Full Name</b>                      Terry Garrison HD 32</p> <p><b>7. Amount</b> \$160.00</p> <p><b>8. Office Sought</b>  <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office: _____ County/District: _____</p> <p><b>9. Candidate Full Name</b></p> <p><b>10. Amount</b></p> <p><b>11. Office Sought</b>  <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office: _____ County/District: _____</p> <p><b>12. Referendum Name</b></p> <p><b>13. Level</b>  <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> County  <input type="checkbox"/> Municipality</p>									
62	10/19/2022	10/19/2022	Govt - Print Media	\$160.00					
<p><b>e. Full Name, Mailing Address (include city, state, and zip), &amp; Phone Number</b>                      Oxford Public Ledger                      200 W Spring St                      Oxford, NC 27565-3247</p>									
<p><b>6. Candidate Full Name</b>                      Robert Fountain / Sheriff</p> <p><b>7. Amount</b> \$160.00</p> <p><b>8. Office Sought</b>  <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input checked="" type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office: _____ County/District: _____</p> <p><b>9. Candidate Full Name</b></p> <p><b>10. Amount</b></p> <p><b>11. Office Sought</b>  <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District <input type="checkbox"/> Co./Municipal Office  <input type="checkbox"/> Other Office: _____ County/District: _____</p> <p><b>12. Referendum Name</b></p> <p><b>13. Level</b>  <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> State <input type="checkbox"/> County  <input type="checkbox"/> Municipality</p>									

2. Total Expenditures This Page	(Sum all the entries on this page)	320.00
3. Total Expenditures All Pages	(Sum all the entries on all receipt pages)	226,948.32

CRO-2210C NC State Board of Elections March 2012



# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

## Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))	e. Amount
63	10/19/2022	10/19/2022	GOTV - Print Media	\$160.00

f. Full Name (Mailing Address (include city, state, and zip) & Phone Number)  
 Oxford Public Ledger  
 200 W Spring St  
 Oxford, NC 27565-3247

g. Candidate Full Name: \_\_\_\_\_ Amount: \$160.00  
 Support  Oppose  
 Senate  House  Other Office  
 District: \_\_\_\_\_ Co. \_\_\_\_\_  
 County/District: \_\_\_\_\_

h. Candidate Full Name: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Support  Oppose  
 Senate  House  Other Office  
 District: \_\_\_\_\_ Co. \_\_\_\_\_  
 County/District: \_\_\_\_\_

i. Referendum Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Support  Oppose  
 State  County  
 Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))	e. Amount
64	10/18/2022	10/18/2022	GOTV - Print Media	\$286.22

f. Full Name (Mailing Address (include city, state, and zip) & Phone Number)  
 Roxboro News Media  
 PO Box 311  
 Roxboro, NC 27573-0311

g. Candidate Full Name: \_\_\_\_\_ Amount: \$286.22  
 Support  Oppose  
 Senate  House  Other Office  
 District: \_\_\_\_\_ Co. \_\_\_\_\_  
 County/District: \_\_\_\_\_

h. Candidate Full Name: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Support  Oppose  
 Senate  House  Other Office  
 District: \_\_\_\_\_ Co. \_\_\_\_\_  
 County/District: \_\_\_\_\_

i. Referendum Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Support  Oppose  
 State  County  
 Municipality

2. Total Expenditures THIS Page (Sum all the "f" entries on this page) **446.22**

3. Total Expenditures ALL Pages (Sum all the "f" entries on all receipt pages) **226,948.32**

**Independent Expenditure Report Cover**

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

**Expenditure Information**

Item Number 65	b. Incurred Date (mm/dd/yyyy) 10/18/2022	c. Communication Start Date 10/18/2022	d. Purpose (including title(s) of communication(s)) GOTV - Print Media	e. Amount \$286.22
9. Full Name, Mailing Address (include city, state, and zip), & Phone Number Roxboro News Media PO Box 311 Roxboro, NC 27573-0311				
Candidate Full Name Keith Day / Sheriff		Amount \$286.22	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	Co. / Municipal Office County/District: _____
Candidate Full Name		Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	Co. / Municipal Office County/District: _____
Referendum Name			Date (Month/Day/Year)	Level <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality

Item Number 66	b. Incurred Date (mm/dd/yyyy) 10/18/2022	c. Communication Start Date 10/18/2022	d. Purpose (including title(s) of communication(s)) GOTV - Print Media	e. Amount \$286.22
9. Full Name, Mailing Address (include city, state, and zip), & Phone Number Roxboro News Media PO Box 311 Roxboro, NC 27573-0311				
Candidate Full Name Ray Jeffers RD 28		Amount \$286.22	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	Co. / Municipal Office County/District: _____
Candidate Full Name		Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input type="checkbox"/> Other Office: _____	Co. / Municipal Office County/District: _____
Referendum Name			Date (Month/Day/Year)	Level <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipality

2. Total Expenditures THIS Page	(Sum all the "e" entries on this page)	572.44
3. Total Expenditures ALL Pages	(Sum all the "e" entries on all receipt pages)	226,948.32

# Independent Expenditure Report Cover

Use this form to report Independent Expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

## 1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including filer's communication(s))	e. Amount
67	10/08/2022	10/08/2022	GOTV - Print Media	\$449.01
f. Full Name, Mailing Address (include city, state, and zip) & Phone Number SignsOnTheCheap.com 11525 Stonehollow Dr Ste A100 Austin, TX 78758-3259				
Candidate Full Name		Office Sought		Amount
Rick Mercier / School Board		<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office		\$449.01
Candidate Full Name		Office Sought		Amount
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office		
Referendum Name		Date	Level	
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including filer's communication(s))	e. Amount
68	10/13/2022	10/13/2022	GOTV - Print Media	\$325.00
f. Full Name, Mailing Address (include city, state, and zip) & Phone Number The Wilson Times PO Box 2447 Wilson, NC 27894-2447				
Candidate Full Name		Office Sought		Amount
Evelyn Sanders / County Commission		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office		\$325.00
Candidate Full Name		Office Sought		Amount
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Co./Municipal Office <input type="checkbox"/> Other Office		
Referendum Name		Date	Level	
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> State <input type="checkbox"/> Municipality <input type="checkbox"/> County

2. Total Expenditures THIS Page (Sum all the entries on this page) 774.01

3. Total Expenditures ALL Pages (Sum all the entries on all pages) 226,948.32

# Independent Expenditure Report Cover

Use this form to report independent expenditures within 30 days after they exceed \$100 or 10 days before an election they affect. This form should also be used to report incurred costs of \$5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO-2520.

## 1. Expenditure Information

Receipt Number 69	Receipt Date (mm/dd/yyyy) 10/13/2022	Communication Start Date 10/13/2022	Purpose (including title(s) of communication(s)) GOTV - Print Media	Amount \$325.00
a. Full Name, Mailing Address (include city, state and zip) & Phone Number The Wilson Times 20 Box 2447 Wilson, NC 27894-2447				
Candidate Full Name Rick Mercer / School Board	Amount \$325.00	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Other Office	County/District Co. Johnston	
Candidate Full Name	Amount	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Other Office	County/District	
Referendum Name	Amount	Level <input type="checkbox"/> Support <input type="checkbox"/> Oppose	County/District	

2. Total Expenditures THIS Page	(Sum all the "A" entries on this page)	325.00
3. Total Expenditures ALL Pages	(Sum all the "A" entries on all receipt pages)	226,948.32