

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 S ROGERS NEW ERA CAMPAIGN	c. ID Number
b. Mailing Address (include City, State and Zip Code) 3392 GOLDEN OAKS ROAD GRAHAM, NC 27253	d. Date Filed 07/10/2022
	e. Phone Number

RECEIVED
 JUL 29 2022
 ALAMANCE COUNTY
 BOARD OF ELECTIONS

2. Report Year 2022	3. Period Start Date (mm/dd/yy) 05/01/2022	4. Period End Date (mm/dd/yy) 06/30/2022	5. Treasurer Full Name SENECA ROGERS
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6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund	9. Type of Report (check only one type of report from one category)		
	Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
7. Type of Fund (if applicable check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:	10. Special Report Name		
8. Number of Fundraisers this Report 0			

2. Account Information		3. Account Information	
a. Financial Institution Full Name BRANCH BANKING & TRUST COMPANY		a. Financial Institution Full Name	
b. Purpose CAMPAIGN	c. Account Code SDR	b. Purpose	c. Account Code
	d. Period Begin Balance \$		d. Period Begin Balance \$

CERTIFICATION
 I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board

Seneca Rogers Printed Name of Signer
 Seneca Rogers Signature of Appointed Treasurer
 07/10/2022 Date

FOR OFFICE USE ONLY

Date Received: <u>7-29-22</u>	Employee: <u>TR</u>	Delivery Method: <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training

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

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

Detailed Summary

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

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
S ROGERS NEW ERA CAMPAIGN	2022 Second Quarter		
Start of Election Cycle: January 1, 2021		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 3,713.51	\$ 524.54
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 715.00	\$ 1,785.00	
6) Contributions from Individuals (CRO-1210)	\$ 4,650.00	\$ 7,450.00	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 600.00	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0.00	\$ 0.00	
9) Loan Proceeds (CRO-1410)	\$ 0.00	\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0.00	\$ 0.00	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$ 0.00	\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ 0.00	\$ 0.00	
11c) Outside Sources of Income (CRO-1250)	\$ 0.00	\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$ 0.00	\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 0.00	\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$ 5,365.00	\$ 9,835.00	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 1,849.17	\$ 2,525.20	
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)	\$ 73.60	\$ 73.60	
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)	\$ 0.00	\$ 605.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1,922.77	\$ 3,203.80	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 7,155.74	\$ 7,155.74	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 0.00		
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ 0.00		
23) Debts and Obligations owed to the Committee (CRO-1620)	\$ 0.00		
24) Account Transfers Within the Committee (CRO-1720)	\$ 0.00		
25) Administrative Support (CRO-1710)	\$ 0.00	\$ 0.00	
26) Forgiven Loans (CRO-1440)	\$ 0.00	\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ 0.00	\$ 0.00	
28) Contributions to be Refunded (CRO-1215)	\$ 0.00	\$ 0.00	

Aggregated Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
S ROGERS NEW ERA CAMPAIGN						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/04/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/20/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/28/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/16/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/20/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		05/25/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/25/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		05/25/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/25/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/04/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/09/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/28/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/28/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/04/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/05/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		05/19/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/19/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		05/24/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/24/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/04/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/04/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/04/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		06/04/2022	\$	25.00
4. Total only this Page					\$	\$640.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$715.00

Aggregated Contributions from Individuals

Page 2 of 2

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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
S ROGERS NEW ERA CAMPAIGN					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	SDR	Electric Funds Tran		06/04/2022	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	SDR	Electric Funds Tran		06/05/2022	\$ 25.00
<input type="checkbox"/> Remove					
4. Total only this Page				\$ 75.00	
5. Total of ALL CRO-1205 Pages				\$ 715.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals

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

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
S ROGERS NEW ERA CAMPAIGN							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CONNIE BOOK 2423 PINEWAY DRIVE BURLINGTON, NC 27215				PRESIDENT			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				ELON UNIVERSITY		\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	SDR	Check		06/15/2022	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HENRY CARROUTH 1245 PEBBLE DRIVE GRAHAM, NC 27253				NOT EMPLOYED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	SDR	Check		06/17/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CLIFTON CARTER 2071 EDGEWOOD AVENUE BURLINGTON, NC 27215				NOT EMPLOYED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	SDR	Electric Funds Tran		06/04/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO 1100)</i>						\$ 4,650.00	

Contributions from Individuals

Page 2 of 3

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

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
S ROGERS NEW ERA CAMPAIGN							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ALLEN GANT JR 1022 W DAVIS STREET BURLINGTON, NC 27215				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 3,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	SDR	Check		05/04/2022		\$ 3,000.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RICKY HURTADO 507 N MAIN STREET GRAHAM, NC 27253				REPRESENTATIVE			
				c. Employer's Name/Specific Field			
				NCGA			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	SDR	Electric Funds Tran		06/04/2022		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TAMARA KERSEY 1045 CAMELOT LN GRAHAM, NC 27253				MANAGER			
				c. Employer's Name/Specific Field			
				BLUE CROSS BLUE SHIELD			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	SDR	Electric Funds Tran		05/31/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 3,350.00	
5. Total of ALL CRO-1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1100)						\$ 4,650.00	

Contributions from Individuals

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

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
S ROGERS NEW ERA CAMPAIGN							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LATOYA PYCRAFT 1284 ASTER WAY BURLINGTON, NC 27215				TEACHER			
				c. Employer's Name/Specific Field			
				ALAMANCE BURLINGTON SCHOOL SYSTEM			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	SDR	Electric Funds Tran		06/28/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
STEVE VAN PELT 2700 JAMESTOWN COURT BURLINGTON, NC 27215				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	SDR	Check		06/23/2022	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 4,650.00	

Disbursements

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

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
S ROGERS NEW ERA CAMPAIGN							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
COALITION 4 COMMUNITY BURLINGTON, NC							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 576.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SDR	Debit Card	O	06/02/2022	\$ 187.60	FOOD FOR CAMPAIGN		
SDR	Debit Card	O	06/04/2022	\$ 388.40	EVENT FOOD FOR CAMPAIGN EVENT		

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
RESTAURANT DEPOT 12 SHARPS AIRPARK COURT GREENSBORO, NC 27409							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 95.97	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SDR	Debit Card	O	06/01/2022	\$ 95.97	FOOD FOR CAMPAIGN		
				\$	EVENT		

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE SOMERVILLE, MA							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 23.02	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SDR	Draft		05/04/2022	\$ 19.86	FUNDS TRANSFER FEE		
SDR	Draft		06/03/2022	\$ 3.16	FUNDS TRANSFER FEE		

5. Total only this Page						\$ 694.99	
6. Total of ALL CRO-1310 Pages						\$ 1,849.17	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							

7. Purpose Codes (List detailed expenditure code as (h.) above)							
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate				
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses				
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund				
O* Other							

* Codes require detailed explanation in required remarks field (k)

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
S ROGERS NEW ERA CAMPAIGN							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
SUGAR DUMPLINS LLC 327 TRYON STREET BURLINGTON, NC 27217							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SDR	Money Order	O	06/04/2022	\$ 100.00	FACEPAINTING AT CAMPAIGN EVENT		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
DARSELL HADLEY 2408 BERKLEY ROAD BURLINGTON, NC 27217							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SDR	Money Order	O	06/04/2022	\$ 100.00	FACEPAINTING FOR CAMPAIGN EVENT		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
ASHLEY MOORE 312 HALL AVE BURLINGTON, NC 27217							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 560.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SDR	Money Order	O	05/26/2022	\$ 240.00	CAMPAIGN SHIRTS		
SDR	Money Order	O	06/01/2022	\$ 240.00	CAMPAIGN SHIRTS		
5. Total only this Page						\$ 680.00	
6. Total of ALL CRO-1310 Pages						\$ 1,849.17	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable) S ROGERS NEW ERA CAMPAIGN	2. ID Number
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3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement)*
 Operating Expenses
 Contributions to Candidates/Political Committees
 Coordinated Party Expenditures

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> ASHLEY MOORE 312 HALL AVE BURLINGTON, NC 27217	b. Coordinated Committee Name	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments
			e. Election Sum to Date \$ 560.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SDR	Money Order	O	06/21/2022	\$ 80.00	CAMPAIGN SHIRTS
				\$	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> BURLINGTON RECREATION & PARKS 1333 OVERBROOK ROAD BURLINGTON, NC 27215	b. Coordinated Committee Name	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments
			e. Election Sum to Date \$ 105.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SDR	Debit Card	O	05/19/2022	\$ 105.00	SHELTER RENTAL FOR CAMPAIGN EVENT
				\$	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> LAMAR WALKER 941 GRAHAM STREET BURLINGTON, NC 27217	b. Coordinated Committee Name	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments
			e. Election Sum to Date \$ 200.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SDR	Money Order	O	06/04/2022	\$ 200.00	MUSIC FOR CAMPAIGN EVENT
				\$	

5. Total only this Page \$ 385.00

6. Total of ALL CRO-1310 Pages
(This line goes in line 15a of Detailed Summary Page CRO-1100 if Operating Expenses)
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)
 \$ 1,849.17

7. Purpose Codes *(List detailed expenditure code in (h) above)*

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			

* Codes require detailed explanation in required remarks field (k)

Disbursements

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

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
S ROGERS NEW ERA CAMPAIGN			
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i>			
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name	d. Comments
BJ'S WHOLESALE 1433 BOONE STATION DRIVE BURLINGTON, NC 27215			
		c. Local Registered (Specify)	e. Election Sum to Date
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	\$ 89.18
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
SDR	Debit Card	O	06/02/2022
			\$ 89.18
			k. Required Remarks
			MATERIALS FOR CAMPAIGN EVENT
5. Total only this Page			\$ 89.18
6. Total of ALL CRO-1310 Pages			\$ 1,849.17
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>			
7. Purpose Codes <i>(List detailed expenditure code in (k) above)</i>			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			
* Codes require detailed explanation in required remarks field (k)			

Aggregated Non-Media Expenditures

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

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

S ROGERS NEW ERA CAMPAIGN						Roll Number
3. Payer Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove	a. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Debit Card	F	06/03/2022	\$ 48.60	RUBBERBANDS AND TICKETS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Debit Card	O	05/26/2022	\$ 25.00	SPECIAL EVENT FEE
4. Total only this Page					\$	73.60
5. Total of ALL CRO 1315 Pages <i>(This line must be on the 1st of Detailed Summary Page CRO-1100)</i>					\$	73.60
6. Purpose Code						
B* - Printing		C - Fundraising		D - To Another Candidate		
E - Salaries		G - Political Party		H* - Holding Public Office Expenses		
J - Penalties		K* - Other Expenses		Q* - Donations to Legal Expense Fund		
O* - Other						
* Codes require detailed explanation in required remarks field (g)						