

JUN 22 2023

Amendment  
 Yes  No

**Disclosure Report Cover**

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

ALAMANCE COUNTY  
 BOARD OF ELECTIONS

<b>1. Committee Information</b>	
<b>a. Full Name</b> S ROGERS NEW ERA CAMPAIGN	<b>c. ID Number</b>
<b>b. Mailing Address (include City, State and Zip Code)</b> 3392 GOLDEN OAKS ROAD GRAHAM, NC 27253	<b>d. Date Filed</b> 01/09/2023
	<b>e. Phone Number</b>

<b>2. Report Year</b> 2022	<b>3. Period Start Date (mm/dd/yy)</b> 07/01/2022	<b>4. Period End Date (mm/dd/yy)</b> 10/22/2022	<b>5. Treasurer Full Name</b> SENECA ROGERS
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<b>8. Number of Fundraisers this Report</b>	0	<input type="checkbox"/> Final	<input type="checkbox"/> Year End	<b>10. Special Report Name</b>
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

<b>3. Account Information</b>		<b>3. Account Information</b>	
<b>a. Financial Institution Full Name</b> BRANCH BANKING & TRUST COMPANY		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> CAMPAIGN	<b>c. Account Code</b> SDR	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$ 7,155.74		<b>d. Period Begin Balance</b> \$

**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

01/09/2023

\_\_\_\_\_  
 Printed Name of Signer

\_\_\_\_\_  
 Signature of Appointed Treasurer

\_\_\_\_\_  
 Date

**FOR OFFICE USE ONLY**

Date Received: 6/22/23 Employee KON Delivery Method  
 Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed

Date Postmarked: \_\_\_\_\_ Employee \_\_\_\_\_  
 Signer has not received mandatory training

Date Scanned: 6-28-23 Employee JK

Date Data Entered: \_\_\_\_\_ Employee \_\_\_\_\_

**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.

# Aggregated Contributions from Individuals

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> S ROGERS NEW ERA CAMPAIGN					<b>2. ID Number</b>	
<b>3. Contributor Information</b>						
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		07/08/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/24/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		08/19/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		10/11/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/08/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		07/18/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		07/03/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		08/19/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		08/28/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/28/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		08/21/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/24/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/24/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		10/10/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/15/2022	\$	35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/28/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/19/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		10/22/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/19/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/23/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/24/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		10/21/2022	\$	1.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Electric Funds Tran		09/27/2022	\$	25.00
<b>4. Total only this Page</b>					\$	\$581.00
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$1,083.50

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
S ROGERS NEW ERA CAMPAIGN							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JEFFREY ANDREWS 618 WARWICK ST BURLINGTON, NC 27215				NOT EMPLOYED			
				<b>c. Employer's Name/Specific Field</b>			
				NOT EMPLOYED			
						<b>e. Election Sum to Date</b>	
						\$ 325.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	SDR	Check		09/26/2022	\$ 325.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MORGAN BAKER 407 FIELDSTONE DR BURLINGTON, NC 27215				TEACHER			
				<b>c. Employer's Name/Specific Field</b>			
				ALAMANCE BURLINGTON SCHOOL SYSTEM			
						<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	SDR	Electric Funds Tran		09/24/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
FRANKIE BLACKBURN 5768 CHURCH RD GRAHAM, NC 27253				CONSULANT			
				<b>c. Employer's Name/Specific Field</b>			
				COMMUNITY DEVELOPMENT			
						<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	SDR	Electric Funds Tran		07/14/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 525.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 6,375.00	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b> S ROGERS NEW ERA CAMPAIGN	<b>2. ID Number</b>
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**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JANET ECKLEBARGER 604 WASHINGTON ST GRAHAM, NC 27253	<b>b. Job Title/Profession</b> SELF EMPLOYED	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> ARTIST	
		<b>e. Election Sum to Date</b> \$ 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		10/12/2022	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) BRIAN FEELEY 123 BELL TOWER CT ELON, NC 27244	<b>b. Job Title/Profession</b> HIGHER EDUCATION	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> ELON UNIVERSITY	
		<b>e. Election Sum to Date</b> \$ 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		08/24/2022	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ALLEN GANT JR 1022 W DAVIS STREET BURLINGTON, NC 27215	<b>b. Job Title/Profession</b> NOT EMPLOYED	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED	
		<b>e. Election Sum to Date</b> \$ 5,000.00

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		07/05/2022	\$ 2,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 2,200.00
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<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 6,375.00
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# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
S ROGERS NEW ERA CAMPAIGN							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JOAN HOLLAND 1 MARTHA LANE CHAPEL HILL, NC 27514				SELF EMPLOYED			
				<b>c. Employer's Name/Specific Field</b> PSYCHOTHERAPIST			
				<b>e. Election Sum to Date</b>		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	SDR	Electric Funds Tran		07/01/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JESSICA JOHNSON 215 PADDLE LANE MEBANE, NC 27302				HUMAN SERVICES PLANNER			
				<b>c. Employer's Name/Specific Field</b> ALAMANCE COUNTY HEALTH DEPARTMENT			
				<b>e. Election Sum to Date</b>		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input checked="" type="checkbox"/>	SDR	Electric Funds Tran		06/25/2022	\$ 25.00		
<input type="checkbox"/>	SDR	Electric Funds Tran		07/25/2022	\$ 25.00		
<input type="checkbox"/>	SDR	Electric Funds Tran		08/25/2022	\$ 25.00		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JESSICA JOHNSON 215 PADDLE LANE MEBANE, NC 27302				HUMAN SERVICES PLANNER			
				<b>c. Employer's Name/Specific Field</b> ALAMANCE COUNTY HEALTH DEPARTMENT			
				<b>e. Election Sum to Date</b>		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	SDR	Electric Funds Tran		09/25/2022	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 175.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 6,375.00	

# Contributions from Individuals

Amendment

Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
S ROGERS NEW ERA CAMPAIGN						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KATHERINE LANDES 1313 CHERRY DRIVE BURLINGTON, NC 27215			ACTURIAL ANALYST			
			<b>c. Employer's Name/Specific Field</b>			
			NATIONAL GENERAL INSURANCE		<b>e. Election Sum to Date</b>	
					\$ 175.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	SDR	Electric Funds Tran		09/24/2022	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARY LONGHILL 8719 LINDLEY MILL RD SNOW CAMP, NC 27349			NOT EMPLOYED			
			<b>c. Employer's Name/Specific Field</b>			
			NOT EMPLOYED		<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	SDR	Electric Funds Tran		10/11/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LISA MARINIS 2453 HODGES ROAD BURLINGTON, NC 27217			TEACHER			
			<b>c. Employer's Name/Specific Field</b>			
			ALAMANCE BURLINGTON SCHOOL SYSTEM		<b>e. Election Sum to Date</b>	
					\$ 150.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input checked="" type="checkbox"/>	SDR	Electric Funds Tran		06/09/2022	\$ 50.00	
<input type="checkbox"/>	SDR	Electric Funds Tran		07/09/2022	\$ 50.00	
<input type="checkbox"/>	SDR	Electric Funds Tran		08/09/2022	\$ 50.00	
<b>4. Total only this Page</b>					\$ 250.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6,375.00	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
S ROGERS NEW ERA CAMPAIGN							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KRISTEN POWERS 3663 S JIM MINOR ROAD HAW RIVER, NC 27258				DIRECTOR			
				<b>c. Employer's Name/Specific Field</b>			
				BENEVOLENCE FARM		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input checked="" type="checkbox"/>	SDR	Electric Funds Tran		06/24/2022		\$ 25.00	
<input type="checkbox"/>	SDR	Electric Funds Tran		07/24/2022		\$ 25.00	
<input type="checkbox"/>	SDR	Electric Funds Tran		08/24/2022		\$ 25.00	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KRISTEN POWERS 3663 S JIM MINOR ROAD HAW RIVER, NC 27258				DIRECTOR			
				<b>c. Employer's Name/Specific Field</b>			
				BENEVOLENCE FARM		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	SDR	Electric Funds Tran		09/24/2022		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARVIN ROGERS 2575 FOXFIRE LN BURLINGTON, NC 27217				NOT EMPLOYED			
				<b>c. Employer's Name/Specific Field</b>			
				NOT EMPLOYED		<b>e. Election Sum to Date</b>	
						\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	SDR	Electric Funds Tran		08/30/2022		\$ 100.00	
<input type="checkbox"/>	SDR	Electric Funds Tran		09/29/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 275.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 6,375.00	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b> S ROGERS NEW ERA CAMPAIGN				<b>2. ID Number</b>	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) WILLIAM TRAYNOR 5768 CHURCH RD GRAHAM, NC 27253			<b>b. Job Title/Profession</b> SELF EMPLOYED		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b> TRUSTED SPACE PARTNERS		
					<b>e. Election Sum to Date</b> \$ 200.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	SDR	Electric Funds Tran		07/23/2022	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 200.00
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6,375.00



# Contributions from Other Political Committees Pg 1 of 1

Amendment  
 Yes  No

Use this form to report contributions from other candidate, referendum or PAC committees

<b>1. Committee Full Name (and Fund if applicable)</b> S ROGERS NEW ERA CAMPAIGN			<b>2. ID Number</b>	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Committee</b>		<b>d. Comments</b>
FRIENDS FOR RON OSBORNE 2585 NEALWOOD AVE GRAHAM, NC 27253		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		<b>c. Level Registered (Specify)</b>		
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: Alamance		<b>e. Election Sum to Date</b>
				\$ 725.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>
SDR	Check		09/17/2022	\$ 725.00
				\$
				\$
<b>4. Total only this Page</b>				\$ 725.00
<b>5. Total of ALL CRO-1230 Pages</b> (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 725.00

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
S ROGERS NEW ERA CAMPAIGN							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
ALAMANCE BURLINGTON SCHOOLS 1712 VAUGHN RD BURLINGTON, NC 27217							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$                      600.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
SDR	Debit Card	O	09/14/2022	\$ 600.00	DONATION TO		
				\$	CUMMINGS BAND		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
BENBASSAT DIGITAL CONSULANTS 1852 BANKING ST GREENSBORO, NC 27408							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$                      200.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
SDR	Debit Card	A	10/05/2022	\$ 200.00	AD IN BURLINGTON		
				\$	LATINO MAGAZINE		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
BENBASSAT DIGITAL CONSULTANTS 1852 BANKING ST GREENSBORO, NC 27408							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$                      300.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
SDR	Debit Card	A	09/20/2022	\$ 300.00	AD IN BURLINGTON		
				\$	LATINO MAGAZINE		
<b>5. Total only this Page</b>						\$ 1,100.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 9,397.13	
<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>							
<b>7. Purpose Codes</b> <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

<b>1. Committee Full Name (and Fund if applicable)</b> S ROGERS NEW ERA CAMPAIGN						<b>2. ID Number</b>
<b>3. Type of Disbursement</b> <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						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> ASHLEY MOORE 312 HALL AVE BURLINGTON, NC 27217			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 260.00	
<b>f. Account Code</b> SDR	<b>g. Form of Payment</b> Money Order	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 07/26/2022	<b>j. Amount</b> \$ 240.00	<b>k. Required Remarks</b> CAMPAIGN SHIRTS	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> ASHLEY MOORE 312 HALL AVE BURLINGTON, NC 27217			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 160.00	
<b>f. Account Code</b> SDR	<b>g. Form of Payment</b> Money Order	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 10/04/2022	<b>j. Amount</b> \$ 160.00	<b>k. Required Remarks</b> CAMPAIGN SHIRTS	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> US POST OFFICE 405 MAPLE AVE BURLINGTON, NC 27215			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 70.40	
<b>f. Account Code</b> SDR	<b>g. Form of Payment</b> Debit Card	<b>h. Purpose Code</b> I	<b>i. Date (mm/dd/yyyy)</b> 10/20/2022	<b>j. Amount</b> \$ 70.40	<b>k. Required Remarks</b>	
<b>5. Total only this Page</b>						\$ 470.40
<b>6. Total of ALL CRO-1310 Pages</b> <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>						\$ 9,397.13
<b>7. Purpose Codes</b> <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

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

<b>1. Committee Full Name (and Fund if applicable)</b> S ROGERS NEW ERA CAMPAIGN						<b>2. ID Number</b>	
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> WOMACK PUBLISHING PO BOX 530 CHATHAM, VA 24531				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 562.50	
<b>f. Account Code</b> SDR	<b>g. Form of Payment</b> Debit Card	<b>h. Purpose Code</b> A	<b>i. Date (mm/dd/yyyy)</b> 10/11/2022	<b>j. Amount</b> \$ 562.50	<b>k. Required Remarks</b> AD IN MEBANE ENTERPRISE		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> LAMAR WALKER 941 GRAHAM ST BURLINGTON, NC 27217				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 200.00	
<b>f. Account Code</b> SDR	<b>g. Form of Payment</b> Money Order	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 08/08/2022	<b>j. Amount</b> \$ 200.00	<b>k. Required Remarks</b> MUSIC FOR CAMPAIGN EVENT		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> LAMAR WALKER 941 GRAHAM ST BURLINGTON, NC 27217				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 200.00	
<b>f. Account Code</b> SDR	<b>g. Form of Payment</b> Money Order	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 08/03/2022	<b>j. Amount</b> \$ 200.00	<b>k. Required Remarks</b> MUSIC FOR CAMPAIGN EVENT		
<b>5. Total only this Page</b>						\$ 962.50	
<b>6. Total of ALL CRO-1310 Pages</b> <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>						\$ 9,397.13	
<b>7. Purpose Codes</b> <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)							

# Aggregated Non-Media Expenditures

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

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
S ROGERS NEW ERA CAMPAIGN							
<b>3. Payee Information</b>							
a. Amend	b. 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	O	09/19/2022	\$ 20.02	SUPPLIES FOR CAMPAIGN EVENT	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Debit Card	O	10/11/2022	\$ 21.78	SUPPLIES FOR CAMPAIGN EVENT	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Debit Card	O	07/20/2022	\$ 50.00	BOOTH SPACE AT FESTIVAL	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SDR	Cash	O	07/28/2022	\$ 20.00	CAMPAIGN SHIRT	
<b>4. Total only this Page</b>						\$	111.80
<b>5. Total of ALL CRO-1315 Pages</b>						\$	111.80
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>							
<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>							
E - Salaries		B* - Printing		C* - Fundraising		D - To Another Candidate	
I - Postage		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
O* - Other		J - Penalties		K* - Office Expenses		Q* - Donations to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (g)							