

Disclosure Report Cover

Amendment
 Yes No

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

1. Committee Information		c. ID Number
a. Full Name COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF		
b. Mailing Address (include City, State and Zip Code) 154 BOONE ROAD BULRINGTON, NC 27217		d. Date Filed 07/01/2026
		e. Phone Number

RECEIVED

JUL 02 2026

ALAMANCE COUNTY
BOARD OF ELECTIONS

2. Report Year 2026	3. Period Start Date (mm/dd/yy) 01/01/2026	4. Period End Date (mm/dd/yy) 02/14/2026	5. Treasurer Full Name ROSALINDA GONZALES
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<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
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input checked="" 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	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

3. Account Information		3. Account Information	
a. Financial Institution Full Name FIDELITY BANK		a. Financial Institution Full Name	
b. Purpose FOR CAMPAIGN RELATED ACTIVITY	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 20,899.26		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

Rosalinda Gonzales Rosalinda Gonzales 07/01/2026
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: July 2, 2026 Employee: AS **Delivery Method**

Date Postmarked: _____ Employee: _____ Normal Mail

Date Scanned: July 2, 2026 Employee: AS Registered Mail

Date Data Entered: _____ Employee: _____ Hand Delivered

_____ _____ Electronically Filed

_____ _____ 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 checked="" type="checkbox"/> Yes	<input 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	
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF	2026 First Quarter		
Start of Election Cycle: January 1, <u>2025</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 20,899.26	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 1,975.00	\$ 2,404.00
6) Contributions from Individuals	(CRO-1210)	\$ 14,740.76	\$ 76,696.11
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 341.05
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)		\$ 16,715.76	\$ 79,441.16
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 25,031.59	\$ 62,655.27
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)	\$ 294.10	\$ 705.21
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 560.00
17) In-Kind Contributions	(CRO-1510)	\$ 1,265.76	\$ 4,497.11
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 26,591.45	\$ 68,417.59
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 11,023.57	\$ 11,023.57
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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

Full Name (and Fund if applicable)					CIP Number	
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
Contribution						
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	1	Cash		01/30/2026	\$	15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card		02/04/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		01/20/2026	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	40.00
4. Total only this Page					\$	\$875.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$1,975.00

Aggregated Contributions from Individuals

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

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

Bill Name (and Fund if applicable)					ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF					
Contribution 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	1	Credit Card		01/04/2026	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		01/06/2026	\$ 15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		02/03/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card		01/20/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		02/08/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card		02/06/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$ 50.00
4. Total only this Page					\$ 870.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 1,975.00

Aggregated Contributions from Individuals

Page 3 of 3

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

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

Bill Name (and Fund if applicable)					Bill Number	
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
Contribution 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	1	Cash		02/06/2026	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		01/06/2026	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		02/12/2026	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		02/06/2026	\$	25.00
4. Total only this Page					\$	\$230.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$1,975.00

Contributions from Individuals

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

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

Committee/Full Name (and Fund if applicable)						ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
ROBERT BAUMAN 21104 FLEETWOOD DRIVE HARPER WOODS, MI 48225		DENTIST				
		c. Employer's Name/Specific Field				
		SELF		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"/>	1	Check		02/03/2026	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
REGINA L BURNETT 903 PORTERFILED AVE BURLINGTON, NC 27217		ADMINISTRATIVE AND SUPPORT SERVICES				
		c. Employer's Name/Specific Field				
		NOT EMPLOYED		e. Election Sum to Date		
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		01/16/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
HENRY CHANDLER 515 LOUIS CHANDLER RD BURLINGTON, NC 27217		NOT EMPLOYED				
		c. Employer's Name/Specific Field				
		AMETEK		e. Election Sum to Date		
				\$ 700.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		02/12/2026	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Apply this Page					\$ 1,100.00	
Apply CRO-1210 Pages					\$ 14,740.76	
Page 6 of 6 of Detailed Summary Page CRO-1210						

Contributions from Individuals

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

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

Committee Name (and fund if applicable)						Committee ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
JAMES CHINNICI BURCH BRIDGE ROAD BURLINGTON, NC 27217			LAW ENFORCEMENT			
			c. Employer's Name/Specific Field			
			NC STATE			
						e. Election Sum to Date
						\$ 200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		01/07/2026	\$ 50.00	
<input type="checkbox"/>	1	Cash		01/16/2026	\$ 50.00	
<input type="checkbox"/>	1	Cash		01/28/2026	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
JAMES CHINNICI BURCH BRIDGE ROAD BURLINGTON, NC 27217			LAW ENFORCEMENT			
			c. Employer's Name/Specific Field			
			NC STATE			
						e. Election Sum to Date
						\$ 200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		02/06/2026	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
BLAKE COLE 112 W VIEW DRIVE BURLINGTON, NC 27215			DEPUTY SHEIRFF			
			c. Employer's Name/Specific Field			
			RANDOLPH COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Debit Card		01/20/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
Only this Page						\$ 300.00
ALL CRO-1210 Pages						\$ 14,740.76
(See page 6 of Detailed Summary Page, CRO-1200)						

Contributions from Individuals

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

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

Committee Full Name (and fund if applicable)						Ballot Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
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	
BRYAN COLEMAN 102 OLD CHARLESTON DRIVE ELON, NC 27244			ATTORNEY			
			c. Employer's Name/Specific Field			
			J BRYAN COLEMAN, ATTORNEY AT LAW		e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Debit Card		01/29/2026	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
RODNEY COUNCILMAN 6510 RASCOE ROAD BURLINGTON, NC 27217			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Debit Card		01/09/2026	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
TERRY D CRENSHAW PO BOX 910 BURLINGTON, NC 27216			PRESIDENT			
			c. Employer's Name/Specific Field			
			CAROLINA NISSAN		e. Election Sum to Date	
					\$ 2,500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		01/12/2026	\$ 2,500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Subtotal this Page					\$ 3,500.00	
ADD CRO-1210 Pages					\$ 14,740.76	
Subtotal (see page 6 of Detailed Summary Page CRO-1210)						

Contributions from Individuals

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

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

Committee or Full Name (and fund if applicable)						2010 Number	
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF							
Prior 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		
NETA J DAVIS 3079 HERITAGE LANE BURLINGTON, NC 27215			EDUCATION				
			c. Employer's Name/Specific Field				
			NOT EMPLOYED				
					e. Election Sum to Date		
					\$ 1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		01/20/2026	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
Prior 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		
TODD DAVIS 3079 HERITAGE LANE BURLINGTON, NC 27215			CRIMINAL JUSTICE PLANNER				
			c. Employer's Name/Specific Field				
			MOSELEY				
					e. Election Sum to Date		
					\$ 2,550.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		01/15/2026	\$ 500.00		
<input type="checkbox"/>	1	Cash		02/06/2026	\$ 50.00		
<input type="checkbox"/>	1	Credit Card		02/11/2026	\$ 1,000.00		
Prior 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		
ANNA DICKENS 1354 SHALLOWFORD CHURCH ROAD ELON, NC 27244			ADMINISTRATIVE ASSISTANT				
			c. Employer's Name/Specific Field				
			ABSS				
					e. Election Sum to Date		
					\$ 75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	1	Debit Card		11/16/2025	\$ 25.00		
<input checked="" type="checkbox"/>	1	Credit Card		12/17/2025	\$ 25.00		
<input type="checkbox"/>	1	Debit Card		01/17/2026	\$ 25.00		
Only this Page						\$ 2,075.00	
All CRO-1210 Pages						\$ 14,740.76	
Page # of Detailed Summary Page CRO-1000							

Contributions from Individuals

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

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

Committee Name (and Fund if applicable)						Page Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
CHARLES ECKMAN 1515 JON HUS COURT BURLINGTON, NC 27215		NOT EMPLOYED				
		c. Employer's Name/Specific Field				
		NOT EMPLOYED				
				e. Election Sum to Date		
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		02/12/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
KRISTIN M FOUST PO BOX 699 ALAMANCE, NC 27201		CONTRACTOR				
		c. Employer's Name/Specific Field				
		MCPHERSON GRADING				
				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"/>	1	Check		02/06/2026	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
NELSON GUNN 100 ARBOR DRIVE ELON, NC 27244		LAW ENFORCEMENT				
		c. Employer's Name/Specific Field				
		NOT EMPLOYED				
				e. Election Sum to Date		
				\$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		01/20/2026	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Totals for this Page					\$ 900.00	
Total CRO-1210 Pages					\$ 14,740.76	
Total of Detailed Summary Page CRO-1200						

Contributions from Individuals

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

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

Committee Name (and fund if applicable)						Committee Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SYLVIA HAYES 3 HOLMES WAY ELON, NC 27244			HOMEMAKER			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
e. Election Sum to Date						
\$ 100.00						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		01/02/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GARY HICKS 3475 MINE CREEK ROAD BURLINGTO, NC 27217			ACCOUNT EXECUTIVE			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
e. Election Sum to Date						
\$ 200.00						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		02/11/2026	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
NESBIT KING 294 WILD TURKEY DRIVE SEMORA, NC 27343			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
e. Election Sum to Date						
\$ 400.00						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		02/03/2026	\$ 400.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
e. Election Sum to Date						
\$ 700.00						
f. Total for CRO-1210 Pages						
\$ 14,740.76						
g. Total for CRO-1210 Pages						

Contributions from Individuals

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

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

Committee Name (and fund if applicable)						C/D Number	
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF							
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
JOHN M LEE 974 BONANZA LANE MEBANE, NC 27302			PUBLIC SAFETY				
			c. Employer's Name/Specific Field NOT EMPLOYED				
					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"/>	1	Check		01/20/2026	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
TOM MANNING 3410 HAMLETT T JOHNS ISLAND, SC 29455			FINANCE				
			c. Employer's Name/Specific Field NOT EMPLOYED				
					e. Election Sum to Date		
					\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Credit Card		01/15/2026	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
JUSTIN MOODY 1924 JEFFRIES CROSSROAD BURLINGTON, NC 27217			OWNER				
			c. Employer's Name/Specific Field GREEN LIFE WASTE & RECYCLING				
					e. Election Sum to Date		
					\$ 1,145.76		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	In-Kind	DONATED4X8 SIGNS	01/07/2026	\$ 1,095.76		
<input type="checkbox"/>	1	Cash		02/06/2026	\$ 50.00		
<input type="checkbox"/>					\$		
Only this Page					\$ 1,595.76		
ALL CRO-1210 Pages					\$ 14,740.76		
See page 6 of Detailed Summary Page (CRO-1210)							

Contributions from Individuals

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

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

Committee Name (and fund if applicable)						ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				
JAY OAKLEY 3258 N NC HIGHWAY 62 BURLINGTON, NC 27217	CERTIFIED PUBLIC ACCOUNTANT					
	c. Employer's Name/Specific Field					
	PEOPLE GURU					
					e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		01/02/2026	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				
BOBBY PRICE 3549 COOK ST MEBANE, NC 27302	LAW ENFORCEMENT					
	c. Employer's Name/Specific Field					
	NOT EMPLOYED (RETIRED)					
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		02/07/2026	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				
TERRI QUALLS 1925 ALLEN JARRETT DRIVE MEBANE, NC 27302	NOT EMPLOYED					
	c. Employer's Name/Specific Field					
	NOT EMPLOYED					
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		01/24/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Total for this Page					\$ 800.00	
Total for ALL CRO-1210 Pages					\$ 14,740.76	
(Use only for General Summary Page CRO-1200)						

Contributions from Individuals

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

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

Committee Name (and Fund if applicable)						ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<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 E SCOTT 3343 JONES DRIVE MEBANE, NC 27302		BUSINESS OWNER				
		c. Employer's Name/Specific Field				
		SELF EMPLOYED				
				e. Election Sum to Date		
				\$ 750.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		02/10/2026	\$ 750.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
CHARLES SLEMENDA 2706 VININGS DRIVE BURLINGTON, NC 27217		LAW ENFORCEMENT				
		c. Employer's Name/Specific Field				
		NOT EMPLOYED				
				e. Election Sum to Date		
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Debit Card		01/08/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
STUART SMITH 811 S THIRD STREETN MEBANE, NC 27302-8180		FILED REPRESENTATIVE				
		c. Employer's Name/Specific Field				
		NOT EMPLOYED				
				e. Election Sum to Date		
				\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		01/20/2026	\$ 50.00	
<input type="checkbox"/>	1	Check		02/07/2026	\$ 50.00	
<input type="checkbox"/>	1	Check		02/13/2026	\$ 50.00	
Total for this Page					\$ 1,000.00	
Total for CRO-1210 Pages					\$ 14,740.76	
Total for CRO-1210 (Detailed Summary) Page CRO-1200						

Contributions from Individuals

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

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

Full Name (and Fund if applicable)						ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				
JIMMY SPOON 1261 WILLIE SPOON LANE BURLINGTON, NC 27217	UNEMPLOYED/RETIRED					
	c. Employer's Name/Specific Field					
	CITY OF GRAHAM	e. Election Sum to Date				
		\$ 200.00				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		01/18/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				
JAMES SPURLING 1211 ARBORGATE CIRCLE CHAPEL HILL, NC 27514	DIRECTOR OF KENAN STADIUM AND FOOTBALL					
	c. Employer's Name/Specific Field					
	UNC CHAPEL HILL	e. Election Sum to Date				
		\$ 200.00				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Debit Card		01/15/2026	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				
JOHN TRIBBLE 7108 ALTDORF DRIVE BAHAMA, NC 27503	LAW ENFORCEMENT					
	c. Employer's Name/Specific Field					
	NOT EMPLOYED	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"/>	1	Credit Card		01/11/2026	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Total by the Page					\$ 800.00	
Total CRO 1210 Pages					\$ 14,740.76	
<small>Use this page for Deleted/Summary Page (CRO 1210)</small>						

Contributions from Individuals

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

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

a. Full Name (and fund if applicable)						b. ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
ROBERT TUCKER 2651 CRESCENT HILL DRIVE MEBANE, NC 27302			LOGGER			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED			
			e. Election Sum to Date			
			\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		02/06/2026	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
RAUL VILLEGAS 154 BOONE ROAD BURLINGTON, NC 27217			WATER PLANT OPERATOR			
			c. Employer's Name/Specific Field			
			CITY OF BURLINGTON WATER RESOURCES DEPARTMENT			
			e. Election Sum to Date			
			\$ 2,225.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		02/05/2026	\$ 1,200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
REGINA WALKER 4580 BLANCHARD RD BURLINGTON, NC 27217			COUNTY GOVERNMENT			
			c. Employer's Name/Specific Field			
			Justice, Public Order, and Safety Activities			
			e. Election Sum to Date			
			\$ 200.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		01/20/2026	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Total for this Page					\$ 1,500.00	
Total for CRO 1210 Pages					\$ 14,740.76	

Contributions from Individuals

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

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

Committee Name (and Fund if applicable)						2 ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
3 Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
THOMAS WRIGHT 713 HUNTERS RUN MEBANE, NC 27302			LAW ENFORCEMENT	DONATED FOOD FOR MEET AND GREET		
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
e. Election Sum to Date						
\$ 170.00						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	In-Kind	PROVIDED FINGER FOODS DURING A MEET	01/20/2026	\$ 170.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3 Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
DAVID LEE WYATT 3132 BROOK VALLEY COURT MEBANE, NC 27302			BANK MANAGER			
			c. Employer's Name/Specific Field			
			FIDELITY BANK			
e. Election Sum to Date						
\$ 300.00						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		02/06/2026	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
					\$ 470.00	
Total CRO-1210 Pages					\$ 14,740.76	
Issued: Line 6 of Detailed Summary Page CRO-1100						

Disbursements

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

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

NIN 110 (and fund if applicable)						2 ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
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		
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
ACCELERATED GRAPHICS 412 BRADLEY STREET BURLINGTON, NC 27215						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 2,981.96
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	B	01/29/2026	\$ 2,111.78	KOOZIES, TSHIRTS.	
				\$	FLYERS	
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
AGE GRAPHICS 678 COLLINS ROAD LITTLE HOCKING, OH 45742 (740) 989-0006						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 13,049.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	01/23/2026	\$ 3,515.00	YARD SIGNS	
				\$		
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
ALAMANCE MEDIA PARTNERS 2509 ELON OSSIPPEE ROAD ELON, NC 27244						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 196.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	A	02/11/2026	\$ 196.00	RADIO ADS	
				\$		
						\$ 5,822.78
Total of all CRO-1310 Pages						\$ 25,031.59
(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)						
Code: (Use 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						
Use detailed explanation in required remarks field (k)						

Disbursements

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

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

Full Name (and Fund if applicable)						ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
CANVA US INC 3212 E CESAR CHAVEZ STREET BUILDING 1, SUITE 1300 AUSTIN, TX 78702						
			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:		\$ 821.20	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	B	01/23/2026	\$ 53.38	BUMPER STICKERS	
1	Debit Card	B	02/02/2026	\$ 162.26	DOORHANGERS	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
GIE CORPORATION 4417 SAMATH DRIVE RALEIGH, NC 27613 (919) 332-5357						
			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:		\$ 3,281.01	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	01/05/2026	\$ 1,705.40	CAMPAIGN	
				\$	MERCHANDISE(TSHIRTS,	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
IMPRINT 14550 BEECHNUT ST HOUSTON, TX 77083						
			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:		\$ 706.47	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	02/12/2026	\$ 706.47	PENS AND WRISTBANDS	
				\$		
Total (This Page)						\$ 2,627.51
Total (CRO-1310 Pages)						\$ 25,031.59
<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>						
Code: (List detailed expenditure code in (f) 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						
<i>(List detailed explanation in required remarks field (k))</i>						

Disbursements

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

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

Full Name (and Fund if applicable)						ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
KT MEDIA 6164 APPLE ORCHARD DRIVE MEBANE, NC 27302						
			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:		\$ 11,800.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	A	02/02/2026	\$ 1,000.00	VIDEO PRODUCTION	
1	Debit Card	A	02/04/2026	\$ 4,800.00	VIDEO PRODUCTION	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
MAJESTIC MEDIA LLC PO BOX 2474 BURLINGTON, NC 27216						
			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:		\$ 9,745.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	A	01/19/2026	\$ 4,080.00	GEOFENCING, ROKU NETWORK	
				\$		
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
NATIONBUILDER 6515 W SUNSET BLVD STE 440 LOS ANGELES, CA 90028 (213) 992-4809						
			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:		\$ 2,737.55	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	01/17/2026	\$ 724.00	EMAILING AND TEXTING	
				\$		
					\$ 10,604.00	
(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)					\$ 25,031.59	
Code: (Use 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						
Use detailed explanation in required remarks field (s).						

Disbursements

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

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

Committee Name (and fund if applicable)						Roll Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF						
Source (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						
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
TEXTING FOR LESS 354 STATE ST HACKENSACK, NJ 07601						
			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:		\$ 1,548.30	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	02/02/2026	\$ 1,548.30	TEXTING	
				\$		
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
THE ALAMANCE NEWS 114 W ELM ST GRAHAM, NC 27253						
			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:		\$ 2,146.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	A	02/03/2026	\$ 1,088.00	NEWSPAPER AD	
				\$		
Add <input type="checkbox"/> Remove <input type="checkbox"/>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
THE ALAMANCE NEWS 114 W ELM STREET BURLINGTON, NC 27253						
			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:		\$ 1,887.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	A	02/03/2026	\$ 629.00	NEWSPAPER AD	
1	Debit Card	A	02/03/2026	\$ 629.00	NEWSPAPER AD	
					\$ 3,894.30	
This Report is CRO-1310 Pages						
(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)						\$ 25,031.59
Code (List detailed expenditure code in the 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						
More detailed explanation in required remarks field (k)						

Disbursements

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

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

Full Name (and Fund if applicable)						CRO Number	
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
THE ALAMANCE NEWS 114 W ELM STREET BURLINGTON, NC 27253							
				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:		\$ 1,887.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	A	02/04/2026	\$ 629.00	NEWSPAPER AD		
				\$			
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
UNITED STATES POST OFFICE 405 MAPLE AVENUE BURLINGTON, NC 27215-5993							
				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:		\$ 78.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	I	01/05/2026	\$ 78.00			
				\$			
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WBAG RADIO P.O. BOX 2450 BURLINGTON, NC 27216							
				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:		\$ 1,626.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	A	01/12/2026	\$ 744.00	RADIO ADS		
1	Check	A	01/28/2026	\$ 432.00	RADIO ADS		
						\$ 1,883.00	
CRO-1310 Pages							
(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)						\$ 25,031.59	
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
(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							
(List detailed explanation in required remarks field (k))							

Disbursements

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

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

Full Name (and fund if applicable)		ID Number			
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF					
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			
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		
WBAG RADIO P.O. BOX 2450 BURLINGTON, NC 27216					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County:			
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
		e. Election Sum to Date			
		\$ 1,626.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	02/04/2026	\$ 200.00	DARE TOURNAMENT
				\$	ADVERTISING
Total for this Page					\$ 200.00
Total for CRO-1310 Pages					\$ 25,031.59
<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>					
Codes (List detailed expenditure code in (k) 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					
Provide detailed explanation in required remarks field (k)					

Aggregated Non-Media Expenditures

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

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

COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF

a. Action		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	1		Electric Funds Tran	O	01/04/2026	\$ 1.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/08/2026	\$ 4.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/09/2026	\$ 20.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/11/2026	\$ 20.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/15/2026	\$ 8.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/15/2026	\$ 8.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/17/2026	\$ 1.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/20/2026	\$ 2.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/20/2026	\$ 4.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/20/2026	\$ 12.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/24/2026	\$ 4.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	01/29/2026	\$ 20.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/04/2026	\$ 2.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/05/2026	\$ 48.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/06/2026	\$ 2.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/06/2026	\$ 4.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/07/2026	\$ 8.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/11/2026	\$ 40.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/12/2026	\$ 2.30	ANEDOT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1		Electric Funds Tran	O	02/12/2026	\$ 4.30	ANEDOT PROCESSING FEE

Only this Page	\$ 220.00
ALL CRO-1315 Pages	\$ 294.10

B* - Printing	D - To Another Candidate
E - Salaries	G - Political Party
J - Penalties	Q* - Donations to Legal Expense Fun
O* - Other	

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

Aggregated Non-Media Expenditures

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

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

COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF

	Account Code	Form of Payment	Purpose Code	Date (mm/dd/yyyy)	Amount	Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	B	02/05/2026	\$ 20.28	ENVELOPES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	B	02/13/2026	\$ 20.28	ENVELOPES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	01/26/2026	\$ 33.54	CAMPAING CLOTHING ITEMS

Print this Page	\$ 74.10
Print ALL RO-1315 Pages (Page 1 of 2 on this Statement Page (RO-1315))	\$ 294.10

B* - Printing	D - To Another Candidate
E - Salaries	G - Political Party
J - Penalties	Q* - Donations to Legal Expense Fun
O* - Other	

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

In-Kind Contributions

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

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

Committee Full Name (and Fund if applicable)		2-ID Number
COMMITTEE TO ELECT BILLY CLAYTON FOR SHERIFF		
Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
JUSTIN MOODY 1924 JEFFRIES CROSSROAD BURLINGTON, NC 27217	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
	d. Election Sum to Date	
		\$ 1,145.76
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
DONATED 4X8 SIGNS	01/07/2026	\$ 1,095.76
		\$
		\$
Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
THOMAS WRIGHT 713 HUNTERS RUN MEBANE, NC 27302	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	DONATED FOOD FOR MEET AND GREET
	d. Election Sum to Date	
		\$ 170.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
PROVIDED FINGER FOODS DURING A MEET AND GREET.	01/20/2026	\$ 170.00
		\$
		\$
Only this Page		\$ 1,265.76
of All CRO-1510 Pages		\$ 1,265.76
<i>Instructions for Use of Detailed Summary Page CRO-1510</i>		