Amendme	ent
X 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.

				AND DESCRIPTION OF THE PERSON NAMED IN							
1. Committee In	formation										
a. Full Name										c. ID Number	
HAROLD OW	EN FOR BU	JRL	LINGTON CIT	TY COI	JNCIL						
b. Mailing Addre	ss (include	City	y, State and Zip	Code)		DEC	CIN	/ED		d. Date Filed	
223 ENGLEMA BURLINGTON										11/24/2025	
BOREINGTO	1, 110 2721	15				NOV	241	2025		e. Phone Number	
						100		OUNTY			
2. Report Year	3. Period S	tart	Date (mm/dd/	y y)	4. Period	End Da	te (min	Yallyyy)		rer Full Name	
2025		07	7/01/2025			09/23/2	2025		HAROLI	OOWEN	
6. Type of Comm		k O	ne)	9. Typ	e of Report	t (cl			type of rep	oort from one category)	
X Candidate Can	npaign 🔲	Part	.y	Munic	-		State/	County		Referendum	
Joint Fundrais	er 🔲	PAC	3		Organizatio	nal	☐ O ₁	ganizatio	onal	Organizational	
Referendum		_	al Expense Fund		Thirty-five	day	Qı	uarterly		☐ Pre-referendum	
7. Type of Fund	(if applie	cable	e, check one)		Pre-primary	Y		First		☐ Final	
Booster Fund	l"				Pre-election	1		Second	l	☐ Supplemental Final	
Building Fund					Pre-runoff			Third		☐ Annual	
Presidential E	lection Year	Cand	lidates Fund		Semi-annua	1		Fourth		☐ Special	
■ NC Public Can	npaign Financ	cing	Fund		Mid Ye	ar	Se	mi-annua	ıl		
					Year E	nd		Mid Ye	ear	10. Special Report Name	
Other:					Final			Year E	nd	2025 35 DAY REPORT	
8. Number of Fu	ındraisers t	this	Report		Special		☐ Fi	nal			
	0						□ _{Sp}	ecial			
3. Account Info	rmation					3. Acc	ount I	nformat	ion		
a. Financial Inst		Nan	ne		Carrier State and Carrier and				on Full Nar	ne	
ATLANTIC UN	NION BAN	K									
b. Purpose			c. Account Cod	le		b. Pur	ose			c. Account Code	
FOR CAMPAIC			655	32021							
ALDERT ED THE	,	I	d. Period Begin	Balan	ce					d. Period Begin Balance	
			\$		*					\$	
CEDTIEICATIC	N	_					Al-Article				
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. Untriher certify that this report is complete, true and correct and that Thave been trained by the NC State Board Printed Name of Signer Complete Complete											
FOR OFFICE U	SEONLY										
Date Receive	ed:	_1	1/24/25		Emplo	yee:	100)	_ <u>D</u> e	elivery Method Normal Mail	
Date Postma	irked:	_			Emplo	yee: _			- 12	Registered Mail Hand Delivered	
Date Scanne	ed:	12	1/1/25	_	Emplo	yee:	0	n	- 6 -	Electronically Filed	
Date Data E	ntered:	_		_	Emplo	yee:				Signer has not received mandatory training	
	assi	stan	annot be used nt treasurer, cur d the Statemen	stodian	of books i	nforma	tion, o	r accoui	nt informat		

Amendment X Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Re		3. ID Number		
HAROLD OWEN FOR BURLINGTON CITY	2025 Special	I			
Start of Election Cycle: January 1,		Total this Reporting Perio	24	Total this Election Cycle	
4) Cash on Hand at Start		\$ 11,221.		\$ 11,218.11	
RECEIPTS		,			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 50.	00	\$ 75.00	
6) Contributions from Individuals	(CRO-1210)	\$ 42,700.		\$ 42,700.00	
7) Contributions from Political Party Committees	(CRO-1220)		-+	\$ 2,000.00	
8) Contributions from Other Political Committees	(CRO-1230)		-+	\$ 0.00	
9) Loan Proceeds	(CRO-1410)	-	-	\$ 0.00	
10) Refunds/Reimbursements to the Committee	(CRO-1240)		+	\$ 0.00	
11) Other Receipt Sources	,			0.00	
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.	00	\$ 0.00	
The state of the s	(CRO-1250)				
11b) Contributions from Not-For-Profit Organizations		<u>.</u>	-		
11c) Outside Sources of Income	(CRO-1250)	<u> </u>	-	\$ 0.00	
11d) Legal Expense Fund - Other Sources	(CRO-1270)			\$ 0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)	<u> </u>		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,lld and lle)	\$ 44,750.	00	\$ 44,775.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 11,083.	+	\$ 11,083.76	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	<u> </u>	**	\$ 0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	l	<u>~~</u>	\$ 0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0.	00	\$ 22.00	
15) Loan Repayments	(CRO-1420)	\$ 0.	00	\$ 0.00	
(6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.	00	\$ 0.00	
(7) In-Kind Contributions	(CRO-1510)	\$ 0.	00	\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13		\$ 11,083.	76	\$ 11,105.76	
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 44,887.	35	\$ 44,887.35	
ADDITIONAL INFORMATION	(GDO 7730)		00	and the second second	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)		00		
22) Debts and Obligations owed by the Committee	(CRO-1610)		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-1100 NC State Boar	(CRO-1215)	\$ 0.	00	\$ 0.00 August 2008	

Aggrega	ited Contril	outions from I	ndividuals _{Page}	1 of	1	Amendme X Yes	nt No
Optional for	rm used to repor	rt NC Contributions	From Individuals of \$	50 or less			•
1. Committe	e Full Name (and	Fund if applicable)			2. ID 1	Number	
HAROLD C	WEN FOR BUR	LINGTON CITY CO	DUNCIL				
3. Contribut	or Information				3/4/1		
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/do	l/yyyy)	f. Amount	
☐ Add ☐ Remove	65532021	Check		09/03/202	25	\$	50.00
4. Total or	nly this Page				\$		\$50.00
	ALL CRO-12 oust be on line 5 of D	205 Pages Detailed Summary Page	CRO-1100)	.,	\$,	\$50.00

CRO-1205

NC State Board of Elections

April 2007

Pg 1 of 8 X Yes □ No

		ndividual contributions		ontributions u	nder \$50 if form CRO 1	1205	is not used	
		(and Fund if applicabl		· <u> </u>		2. J	ID Number	1 1 1 1
HARO	LD OWEN FOR	BURLINGTON CITY	Y COUNCIL	_	···			
	ributor Informati			Add 🔲 Re	emove	V		
	Name, Mailing Ado			b. Job Title/Pr		d. (Comments	
(inclu	ide city, state, & z	ip)		ATTORNEY	r			
	ON BROWN]		!
	X 2958				Name/Specific Field			ļ
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	ame, Mailing Add			b. Job Title/Pr		<u>а.</u> (Comments	Lite William Trian
	de city, state, & zi				DISTRIBUTION		· OIII III · II · I	
	AM COBLE			CHEMICAL	DISTRIBUTION			
224 EASTWOOD CT			c. Employer's	Name/Specific Field				
BURLINGTON, NC 27215		ALLISON G	ROUP INC					
•					e. E	dection Sum	to Date	
						\$		100.00
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							\$	
							\$	
	ributor Informatic			Add 🔲 Re				
	lame, Mailing Add			b. Job Title/Pr		d. C	Comments	
	de city, state, & zi	ip)		INSURANCE	3			
	S CROUCH			- Employer's	Name/Specific Field			
	INEWAY DR	7015		HARRIS CR	_			
DUKLI	NGTON, NC 27	215	:	HAKKIS CK	OUCH INC	e. F	lection Sum	to Date
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		,	·	<u> </u>		\$		500.00
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	al only this Pa	<u> </u>		special series		\$		1,100.00
	al of ALL CRO	O-1210 Pages 6 of Detailed Summary P	Page CRO-1100)			\$	4	12,700.00

Amendment

		om Individuals			$\frac{2}{\sqrt{350}}$ of $\frac{8}{\sqrt{350}}$	_	X Yes	□ No
		(and Fund if applicab			under \$50 if form CRO		is not used ID Number	
		BURLINGTON CIT		** '		2.1	m Number	
	ributor Informati					1.5		Name of the A
4	Name, Mailing Add			b. Job Title/	Profession	d. C	Comments	
	ude city, state, & z	ip)		DEVELOP	ER			
	N CUMMINGS			a Employer	s Nama/Ensaifia Field	-		
	BUXTON WAY INGTON, NC 27	7016		c. Employer's Name/Specific Field VENNTERRA LAD				
BUKL	indion, NC 27	7213			MENT LLC	e. I	Dection Sur	n to Date
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						\$		6,800.00
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a. Full l	Name, Mailing Ado	dress & Phone		b. Job Title/l	Profession	d. (Comments	
(include city, state, & zip)				CPA				
CRAIC	3 DURHAM			Control No. (Control Control				
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				PLLC			acciton Sun	
				<u> </u>		\$		1,000.00
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	Name, Mailing Ado			b. Job Title/I	Profession	d. C	Comments	
(inclu	ide city, state, & z	ip)		COMMERC	CIAL REALTOR			
	ARD GUNN			. En el en el	- N /C	4		
PO BC		10.17		···	s Name/Specific Field	4		
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							\$	
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(I RIS	une musi de on line	6 of Detailed Summary 1	uge CAU-1100)	<u> </u>		<u>i </u>		

Pg 3 of 8 X Yes No

		om individual	•		$\frac{3}{9}$ of $\frac{8}{9}$	_	X Yes	□ No
		(and Fund if applicab			inder \$50 if form CRO			
1		BURLINGTON CIT		<u> </u>		Z.	ID Number	
Intito		DOIGHNOTON CIT	COONCIL					
	ributor Informati			Add 🔲 R	emove			
	Name, Mailing Ado			b. Job Title/Profession			Comments	
	ide city, state, & z			_SPARTANI				
	RT HARKRADE			PLANNING	S DEPARTMENT S Name/Specific Field	4		
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(inclu	de city, state, & z	ip)		MANUFAC	TURER			
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	OX 790				Name/Specific Field	-		
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						\$		1,000.00
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	iame, Mailing Ado			b. Job Title/P	rofession	d. (Comments	
	de city, state, & z	ip)		7	AND ELECTRICAL			
SAM H				SUPPLIES	N	ļ		
	A PALMA	100			Name/Specific Field			
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(Tunn i	vo vn unc	, canunuty 1	-90 AUG-1100)			1		

		Amenome	BE
Pg = 4 of	8	X Yes	□ No

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

1. Com	mittee Full Name		2.	ID Number			
HARO	LD OWEN FOR	BURLINGTON CIT	Y COUNCIL				
3. Cont	ributor Informati	on		Add 🔲 R	Remove		
a. Full N	iame, Mailing Ado	dress & Phone	·	b. Job Title/I	Profession	đ. (Comments
(inclu	de city, state, & z	ip)		LIGHTING	AND ELECTRICAL		
VICTO	RIA HUNT	•		SUPPLIES		1	
161 VI	A PALMA			c. Employer'	s Name/Specific Field	1	
PALM BEACH, FL 33480-4921				HUNT ELE	ECTRIC	Ļ,	
l						e.	Election Sum to Date
						\$	6,800.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	<u> </u>	k. Amount
	65532021	Check			08/01/2025		\$ 6,800.00
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3. Cont	ributor Informati	on A.		Add □ R	emove		
a. Full N	lame, Mailing Add	dress & Phone		b. Job Title/i	rofession	d. C	Comments
(inclu	de city, state, & z	ip)		LIGHTING	AND ELECTRICAL		
SAM HUNT IV			SUPPLIES				
3021 N. FAIRWAY DRIVE BURLINGTON, NC 27215			c. Employer's	s Name/Specific Field			
				HUNT ELE	ECTRIC	<u> </u>	
					e. I	Election Sum to Date	
		<u>,</u>				\$	6,800.00
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	lame, Mailing Ado			b. Job Title/F	Profession	d. (Comments
(inclu	de city, state, & z	ip)		OPERATIO	NS MANAGER		
	S KIRKPATRICE OUNTRY CLUB			c. Employer's	s Name/Specific Field		
	NGTON, NC 27			KIRKPATI	RICK CONCERTE		
	,					e. I	Dection Sum to Date
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(anto i	····· mest up un une	v vj мышен эшинију I	-6mo-1100/	the state of the state of		ı	

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		om Individuals			$\frac{5}{100}$ of $\frac{8}{100}$ and $\frac{5}{100}$ of $\frac{8}{100}$	- 1205	X Yes	□ No
	•	(and Fund if applicabl		ontinuutions u			D Number	r sin egen
		BURLINGTON CIT			<u> </u>	-	D I (dillo)	
2.5	and the second second second second			4.71				
	ributor Informati lame, Mailing Ado			Add R		13.7	- 113 v 11 - 1	<u> </u>
	de city, state, & z			TEXTILES	rotession	a. (Comments	
	ST KOURY JR			TEXTILES				
PO BO				c. Employer's	Name/Specific Field]		
BURLINGTON, NC 27216				CAROLINA	A HOSIERY	<u> </u>		
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3. Conti	ributor Informati	on		Add □ R	emove			1124 214
a. Full Name, Mailing Address & Phone				b. Job Title/P	rofession	d. C	Comments	
	de city, state, & z		·	CPA				
	TANCE MCCAL			c Employer's	Name/Specific Field	┨		
	MBROKE STRE DN, MA 02118	LE 1 #4			ND GRAY LLP	┨		
DOST	711, 141A 02116			ROOTES THAT GRATT EET		e. I	dection Sun	to Date
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	lame, Mailing Add			b. Job Title/P	rofession	d. C	Comments	
	de city, state, & z			DOCTOR				
	MAN MCQUEEN WILLOWBROO			c. Employer's	Name/Specific Field	1		
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	65532021	Check		<u> </u>	09/04/2025		\$	250.00
							\$	

		\$
4. Tota	l only this Page	\$ 1,350.00
	il of ALL CRO-1210 Pages ine must be on line 6 of Detailed Summary Page CRO-1100)	\$ 42,700.00

Pg 6 of 8 Amendment Yes No

				
Use this form to report individu	ial contributions over	\$50 or contributions u	inder \$50 if form	CRO 1205 is not used

1. Comr	nittee Full Name	(and Fund if applicabl	e)			2.1	D Number	
		BURLINGTON CITY						
	ributor Informati			Add 🔲 Re	move			×
	ame, Mailing Ado			b. Job Title/Pr		d. C	Comments	
(inclu	de city, state, & z	ip)		CAR DEALE	ERSHIP			
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	UITT DRIVE				Name/Specific Field	ļ		, ,
ELON,	NC 27244			NICHOLS A	UTOMOTIVE		lection Su	n to Data
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	ame, Mailing Add			b. Job Title/Pr		d. C	Comments	
	de city, state, & z			BUSINESS C			- <u>-</u>	
	N SAPP		_					
	MHERST AVEN				Name/Specific Field	-		
BURLI	NGTON, NC 27	7215		IVARS INC	j	P E	lection Su	n to Date
						\$		100.00
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a. Full N	ame, Mailing Ado	dress & Phone		b. Job Title/Pr	ofession	d. C	Comments	
	de city, state, & z			CAR DEALERSHIP				
	RD H SHIRLEY			o Emminor	Nama/Casaifia IE 113	-		
	/. FRONT STRE				Name/Specific Field	4		
RUKLI	NGTON, NC 27	/215		NOT EMPLO	OYEED	e. Election Sum to Date		
						\$		250.00
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	65532021	Check			09/16/2025		\$	250.00
							\$	
							\$	
4. Tota	al only this Pa	ge				\$		6,750.00
5. Tota	al of ALL CR	O-1210 Pages	La CRO			\$		42,700.00
(This i	ine must be on line	6 of Detailed Summary I	age CKU-1100)					<u> </u>

Pg 7 of 8 Yes No

Jse this form to report individual	al contributions over \$5	0 or contributions under \$	50 if form CRO 1205 is not used

		(and Fund if applicabl				2.1	ID Number		
HARO	LD OWEN FOR	BURLINGTON CITY	Y COUNCIL						
	ributor Informati		· □	Add 🔲 R	 				
	Name, Mailing Add			b. Job Title/P	rofession	d. (Comments		
	ide city, state, & zi	<u>íp)</u>		CAR DEAL	ERSHIP				
	A STEAKNS JRNBURY PL			c. Employer's	Name/Specific Field	1			
	NC 27244			STEARNS.	AUTOMATIVE	<u> </u>	<u> </u>		
						e. E	Election Sum to Date		
						\$	1,500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount		
	65532021	Check			08/12/2025		\$ 1,500.00		
							\$		
							\$		
	ributor Informati					ANA			
	lame, Mailing Add			b. Job Title/P		d. C	Comments		
	ide city, state, & zi IAS STEELE	(p)		ATTORNEY	<i>(</i>				
	IAS STEELE IMHERST AVEN	ME		c. Employer's	Name/Specific Field	1			
	NGTON, NC 27			PITTMAN & STEELE LAW					
						e. E	Section Sum to Date		
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription j. Date (mm/dd/yyyy)			k. Amount		
	65532021	Check			09/02/2025		\$ 100.00		
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	Name, Mailing Add			b. Job Title/P	rofession	d. C	Comments		
	ide city, state, & zi	(p)	<u> </u>	CPA					
	Y THOMAS X 1959			c. Employer's	Name/Specific Field	1			
	INGTON, NC 27	′216			CHANDLER				
				THOMAS &	Ł HINSHAW	e. E	Dection Sum to Date		
						\$	500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount		
	65532021	Check			07/27/2025		\$ 500.00		
							\$		
							\$		
4. Tot	al only this Pa	ge		4 <u>.41 ()</u>		\$	2,100.00		
		O-1210 Pages 6 of Detailed Summary F	Page CRO-1100)			\$	42,700.00		

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(This line must be on line 6 of Detailed Summary Page CRO-1100)

Pg 8 of 8 X Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number HAROLD OWEN FOR BURLINGTON CITY COUNCIL 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) CEO **HUGH WILSON** c. Employer's Name/Specific Field 3126 SUTTON PLACE BURLINGTON, NC 27215 **MACHINERY** e. Election Sum to Date **INSTALLATION COMPANY** 1,000.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 65532021 09/04/2025 \$ 1,000.00 \$ \$ 4. Total only this Page \$ 1,000.00 5. Total of ALL CRO-1210 Pages \$ 42,700.00

CDO 1210

NC State Board of Elections

April 2007

Contribution	ons from Politi	cal Party Committee	es Pg 1 of	1	Amendment Yes No
Use this form t	o report contribution	s from a political party			
1. Committee Fu	ll Name (and Fund if a	pplicable)		2. ID	Number
HAROLD OWE	N FOR BURLINGTO	ON CITY COUNCIL			
3. Contributor In	ıformation	☐ Add □	Remove	<u> </u>	
a. Full Name, Ma	iling Address & Phone		i	b. Cor	nments
(include city, s	tate, & zip)				
COMMITTEE 1	TO ELECT JIM BUT	LER		ļ	
520 MEADOV					
BURLINGTON	, NC 27215			c Flee	tion Sum to Date
				\$	2,000.00
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/do	/yyyy)	h. Amount
65532021	Check		09/17/202	25	\$ 2,000.00
					\$
					\$
4. Total only	this Page			\$	2,000.00
THE RESERVE OF THE PARTY OF THE PARTY OF THE	L CRO-1220 Pag e on line 7 of Detailed Si	les immary Page CRO-1100)		\$	2,000.00
CRO-1220		NC State Board of Ele-	ctions	•	April 2007

Disbursem	ents				Pg 1	of	3 X Y	es No
	report expenditures		e for o	perating expen	ses, contrib	utions t	o candidat	e/political
	coordinated party ex Il Name (and Fund i			·	- 		2. ID Nu	nhan
	EN FOR BURLING		NCIL		<u> </u>	<u> </u>	2. 10 140	HDET .
de formation derivative	Diago	ina namania CDC	1210	formura form annual	to day of a C Di	- L'		
Type of Dis buOperating Exp		<i>use separate CRC</i> ributions to Candidat			i type of Di		ent.] ated Party Ex	nenditures
4. Payee Informs		todations to Candidat			Remove	Coordina	iced raity Lx	penditures
	iling Address & Pho	one.	<u> </u>	b. Coordinate		e Name	d. Comm	ents
(include city, stat	-						1	
	GNS AND GRAPHI	CS CO						
232 NORTH M.				c. Level Regist				
BURLINGTON	, NC 27217			☐ Federal	Cou	•	- IN - 4'	- C 4- W-4-
				State	✓ Mu	icipanty	e. Election	Sum to Date
							\$	2,094.97
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					\$	\dashv		
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	iling Address & Pho	ne	<u> </u>	b. Coordinated		e Name	d. Comm	ents
(include city, stat	•							
CRONE & CO I			•					
2009 FAIRVIEV				c. Level Regist				
RALEIGH, NC	27628			Federal	☐ Con	77 44	G 4. B. 4.	
				☐ State	и ми	iicipality:	e. Election	Sum to Date
							\$	5,000.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. R	equired Re	marks
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					\$	FA	CEBOOK	
4. Payee Informs	tion	u Ngga ngangan	: :	Add 🔲	Remove	e vin sta		er gelekatish wili il
	iling Address & Pho	ne	, e e e e e e	b. Coordinated		e Name	d. Commo	ents
(include city, stat	-							
HOME DEPOT							_	
2741 KIRKWO	OD DRVIE			c. Level Regist				
BURLINGTON	, NC 27215			☐ Federal ☐ State		-	- Flection	1 Sum to Date
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							\$	85.19
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					\$	ВА	NNERS	
		i Tangaran palabatan					1 6	7,180.16
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	n line 13a of Detailed S n line 13b of Detailed S		-			al Comm	, \$	11,083.76
	r line 13c of Detailed S		-				^	
7. Purpose Co	des (List detailed	expenditure code	in (h.)	above)				
A* - Media	B* - Printin			undraising	D -	To Ano	ther Candid	late
E - Salaries	F* - Equipm	ent	G-Po	litical Party			_	ffice Expenses
I - Postage	J - Penaltie	s	K* - C	office Expenses	9 Q*	- Donat	ion to Lega	l Expense Fund
O* Other		- in waari	awl f	Sala (le)				1.2
i – Coues regulro	e detailed explanatio	n vu redarea ten	LAI KS I	ieia (v)		-	<u> </u>	

Disbursem	nante				n.	ء د		Ameno	··
	report expenditures	from the committee	aa far a	ting avaar	Pg				
	coordinated party ex		e 101 0	perating exper	18 0 :	i, controute	ons ic	candidate.	/ponticai
	ull Name (and Fund i	•						2. ID Num	ber
	EN FOR BURLING		NCIL						
3. Type of Disbu		use separate CRO				pe of Disbu	rseme	nt.)	
X Operating Exp	penses Contr	ributions to Candidat	es/Polit	ical Committees		Coc	ordinat	ed Party Exp	enditures
4. Payee Inform						move	Mility		
-	ailing Address & Pho	one		b. Coordinate	d C	ommittee Na	am e	d. Comme	nts
(include city, sta				-					
LAMAR COMI				c. Level Regis	tere	d (Specify)			
PO BOX 74696 ATLANTA, GA				Federal		County:	;		
A1111111111111111111111111111111111111	1 30374			State		Municip	ality:	e. Dection	Sum to Date
								\$	1,800.00
f. Account Code	g. Form of Payment	h. Purnose Code	li. Date	(m m /dd/yyyy)	li. <i>i</i>	Amount	k. Re	quired Ren	•
65532021	Check	A		8/22/2025	\$ \$	1,800.00		LBOARD	iding
					\$	1,000.00			
4 Daniel Tuferne		La Maria de la Region Afri		· A du la Filia	Ľ	Marcoll, V /	<u> </u>	era i vita i kila	
4. Payee Inform	ation ailing Address & Pho	<u>Preferit (j. j. s</u> one		Add b. Coordinate		move	·m e	d. Comme	<u>A III (Markins)</u> nto
a. Full Name, Ma (include city, sta	_	one		D. Couldinate	u C	JIII 1111111111111111111111111111111111	1111 E	u. Comme	1118
GREGORY OV				†					
8042 NC HWY				c. Level Regis	tere	d (Specify)			
OXFORD,, NC				☐ Federal		County:			<u>.</u>
				☐ State		Municip	ality:	e. Dection	Sum to Date
								\$	288.00
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					\$			<u> </u>	
4. Payee Inform				Add	l	move	4. A. (%)		
	ailing Address & Pho	<u>eniasi Perivis Asility.</u> One		b. Coordinate	<u></u>		ım e	d. Comme	<u>lida Med alle disclarios.</u> n fe
(include city, sta		JIIC		bi 0001 111111	<u> </u>	7M1 M1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		u. commi	
TAKE CHARG				1					
2408 HYDE ST				c. Level Regis	tere				
BURLINGTON	I, NC 27216			☐ Federal		County:			
			i	State		Municip	ality:	e. Election	Sum to Date
								\$	1,200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	km ount	k. Re	quired Rem	arks
65532021	Draft	A	08	8/05/2025	\$	600.00	WEE	SSITE DEV	VELOPMENT
65532021	Draft	A	09	9/10/2025	\$	600.00	WEE	SSITE DES	SIGN
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	CRO-1310 Pages		Marker (j. e. Marker (j. e.						
August August 1980 in 1	in line 13a of Detailed S	Summary Page CRO	-1100 if	Operating Expe	nses)	· i	e e	11,083.76
(This line goes i	in line 13b of Detailed S	Summary Page CRO	-1100 if	Contrib to Cand	lidat	es/Political C	omm)	\$	11,005.70
	n line 13c of Detailed S				rty E	xpenditures)			
	odes (List detailed				s ign				
A* - Media	B* - Printin	•		undraising				her Candida	
E - Salaries I - Postage	F* - Equipme J - Penaltie			litical Party Office Expenses			-	-	fice Expenses Expense Fund
I - Fustage	J - Tellaille	3	K - C	vince expense:	3	Q - 10	UHALIC	nt to Legat	expense runu

O* Other

Disbursen Use this form to	ee for o	operating exper	Pg nses	3_ of , contributi		Ameno 3 Ye candidate	s 🔲 No		
	ull Name (and Fund		1 1 1 1			. Mariaha		2. ID Num	ber
HAROLD OW	EN FOR BURLING	TON CITY COU	INCIL						
3. Type of Disb		use separate CR(
X Operating Ex		ributions to Candida	tes/Polit	tical Committees		☐ Cod	ordinat	ed Party Exp	enditures
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· ·	ailing Address & Ph	one		b. Coordinate	d Co	mmittee N	ame	d. Comme	nts
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	ΓES POSTAL SERV	'ICE		c. Level Regis	+	d (Casaiga)		ļ	
405 MAPLE A				Federal	tere	County:			
BURLINGTON	N, NC 2/215			State		Municip		e. Election	Sum to Date
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Ren	arks
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1. Payee Inform	ation			Add 🔲	Rer	nove			
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2318 CHURHI				c. Level Regis	tere				
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				State		Municip	anty.	e. Mection	Sum to Date
								\$	600.00
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5. Total only thi	s Page							\$	615.60
	en propagation and the second	and the state of t	4.00	and the second of the second o		er e	4 4 44 44		

CRO-1310

O* Other

A* - Media

E - Salaries

I - Postage

6. Total of ALL CRO-1310 Pages

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

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

B* - Printing

J - Penalties

F* - Equipment

(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)

* Codes require detailed explanation in required remarks field (k) NC State Board of Elections

C* - Fundraising

G - Political Party

K* - Office Expenses

December 2009

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

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