

# Disclosure Report Cover

Amendment

Yes  No

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

## 1. Committee Information

a. Full Name c. ID Number

COMMITTEE TO ELECT KELLY ALLEN

b. Mailing Address (include City, State and Zip Code)

PO BOX 1  
HAW RIVER, NC 27258

d. Date Filed

01/23/2026

e. Phone Number

2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name

2025

07/01/2025

12/31/2025

REBEKAH LOY

## 6. Type of Committee (Check One)

Candidate Campaign  Party  
 Joint Fundraiser  PAC  
 Referendum  Legal Expense Fund

## 7. Type of Fund (if applicable, check one)

"Booster Fund"  
 Building Fund  
 Presidential Election Year Candidates Fund  
 NC Public Campaign Financing Fund  
 Other:

## 8. Number of Fundraisers this Report

0

## 9. Type of Report (check only one type of report from one category)

Municipal	State/County	Referendum
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Special	<input type="checkbox"/> Final	
	<input type="checkbox"/> Special	

## 10. Special Report Name

## 3. Account Information

a. Financial Institution Full Name

TRULIANT FEDERAL CREDIT UNION

## 3. Account Information

a. Financial Institution Full Name

TRULIANT FEDERAL CREDIT UNION

## b. Purpose

CAMPAIGN REPORTING

## c. Account Code

1

## b. Purpose

CAMPAIGN REPORTING

## c. Account Code

2

## d. Period Begin Balance

\$

## d. Period Begin Balance

\$

## CERTIFICATION

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

Rebekah W. Loy

Printed Name of Signer

Rebekah W. Loy

Signature of Appointed Treasurer

01/23/2026

Date

## FOR OFFICE USE ONLY

Date Received:

1/29/24

Employee:

A

## Delivery Method

Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed

Date Postmarked:

Employee:

Date Scanned:

Employee:

K

Date Data Entered:

Employee:

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  
 Yes  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 KELLY ALLEN	2025 Year End Semi-Annual		
<b>Start of Election Cycle: January 1, 2025</b>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
4) Cash on Hand at Start		\$ 0.00	\$ 0.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 230.00	\$ 230.00
6) Contributions from Individuals	(CRO-1210)	\$ 23,150.00	\$ 23,150.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 500.00	\$ 500.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 23,880.00	\$ 23,880.00
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 6,106.05	\$ 6,106.05
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)	\$ 96.02	\$ 96.02
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 6,202.07	\$ 6,202.07
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 17,677.93	\$ 17,677.93
<b>ADDITIONAL INFORMATION</b>			
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** Page 1 of 1 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> COMMITTEE TO ELECT KELLY ALLEN			<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	1	Check		10/09/2025	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		10/04/2025	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		09/08/2025	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		10/02/2025	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		09/29/2025	\$ 30.00
<input type="checkbox"/> Remove					
<b>4. Total only this Page</b>					\$ 230.00
<b>5. Total of ALL CRO-1205 Pages</b> (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 230.00

CRO-1205

NC State Board of Elections

April 2007

# Contributions from Individuals

Amendment  
 Yes  No

Pg 1 of 16 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> COMMITTEE TO ELECT KELLY ALLEN					<b>2. ID Number</b>
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) BARBARA ACOSTA 1347 N SELLARS MILL RD BURLINGTON, NC 27217-1825					b. Job Title/Profession REALTOR c. Employer's Name/Specific Field EXP REALTY e. Election Sum to Date \$ 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"/>	1	Check		11/04/2025	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) JOHNNY BAKATSIAS 142 N GRAHAM HOPEDALE RD GRAHAM, NC 27217					b. Job Title/Profession CEO c. Employer's Name/Specific Field WESTERN STEAK HOUSE e. Election Sum to Date \$ 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"/>	1	Check		09/26/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) FRANK BELL 1411 BOONE RD BURLINGTON, NC 27217					b. Job Title/Profession FARMER c. Employer's Name/Specific Field CATTLE FARMER e. Election Sum to Date \$ 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 type="checkbox"/>	1	Check		10/09/2025	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 450.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 23,150.00

# Contributions from Individuals

Amendment  
 Yes  No

Pg 2 of 16 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>																	
COMMITTEE TO ELECT KELLY ALLEN																			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td rowspan="3">LARRY BERTUCCELLI 1355 CROTON LAKE RD YORKTOWN HEIGHTS, NY 10598</td> <td>IT</td> <td colspan="4" rowspan="3">e. Election Sum to Date  \$ 100.00</td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>INTERNET SERVICES</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				LARRY BERTUCCELLI 1355 CROTON LAKE RD YORKTOWN HEIGHTS, NY 10598	IT	e. Election Sum to Date  \$ 100.00				c. Employer's Name/Specific Field	INTERNET SERVICES
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																	
LARRY BERTUCCELLI 1355 CROTON LAKE RD YORKTOWN HEIGHTS, NY 10598	IT	e. Election Sum to Date  \$ 100.00																	
	c. Employer's Name/Specific Field																		
	INTERNET SERVICES																		
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		10/02/2025	\$ 100.00														
<input type="checkbox"/>					\$														
<input type="checkbox"/>					\$														
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td rowspan="3">THOMAS CHANDLER 5348 S NC HWY 62 BURLINGTON, NC 27215</td> <td>CEO</td> <td colspan="4" rowspan="3">e. Election Sum to Date  \$ 1,000.00</td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>CHANDLER CONCRETE</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				THOMAS CHANDLER 5348 S NC HWY 62 BURLINGTON, NC 27215	CEO	e. Election Sum to Date  \$ 1,000.00				c. Employer's Name/Specific Field	CHANDLER CONCRETE
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																	
THOMAS CHANDLER 5348 S NC HWY 62 BURLINGTON, NC 27215	CEO	e. Election Sum to Date  \$ 1,000.00																	
	c. Employer's Name/Specific Field																		
	CHANDLER CONCRETE																		
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		09/08/2025	\$ 1,000.00														
<input type="checkbox"/>					\$														
<input type="checkbox"/>					\$														
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a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																	
THOMAS CHANDLER JR 2516 PINEWAY DR BURLINGTON, NC 27215-4440	PRESIDENT	e. Election Sum to Date  \$ 1,000.00																	
	c. Employer's Name/Specific Field																		
	CHANDLER CONCRETE																		
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		09/15/2025	\$ 1,000.00														
<input type="checkbox"/>					\$														
<input type="checkbox"/>					\$														
<b>4. Total only this Page</b> \$ 2,100.00																			
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> \$ 23,150.00																			

# Contributions from Individuals

Pg 3 of 16  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>																									
COMMITTEE TO ELECT KELLY ALLEN																														
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b></td> <td><b>b. Job Title/Profession</b></td> <td><b>d. Comments</b></td> </tr> <tr> <td colspan="2">MARIA CLAPP 2217 WHITSETT ST BURLINGTON, NC 27215</td> <td>REAL ESTATE BROKER</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><b>c. Employer's Name/Specific Field</b></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>ELM REALTY</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><b>e. Election Sum to Date</b></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>\$ 100.00</td> <td></td> </tr> </table>							<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b>	<b>d. Comments</b>	MARIA CLAPP 2217 WHITSETT ST BURLINGTON, NC 27215		REAL ESTATE BROKER				<b>c. Employer's Name/Specific Field</b>				ELM REALTY				<b>e. Election Sum to Date</b>				\$ 100.00	
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b>	<b>d. Comments</b>																											
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<input type="checkbox"/>	1	Check		10/02/2025	\$ 100.00																									
<input type="checkbox"/>					\$																									
<input type="checkbox"/>					\$																									
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<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b>	<b>d. Comments</b>																											
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<input type="checkbox"/>	1	Check		09/26/2025	\$ 100.00																									
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<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b>	<b>d. Comments</b>																											
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		<b>e. Election Sum to Date</b>																												
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<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"/>	1	Check		09/05/2025	\$ 500.00																									
<input type="checkbox"/>					\$																									
<input type="checkbox"/>					\$																									
<b>4. Total only this Page</b>					\$ 700.00																									
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 23,150.00																									

# Contributions from Individuals

Pg 4 of 16  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>
COMMITTEE TO ELECT KELLY ALLEN					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  TERRY CRENSHAW P.O. BOX 910 BURLINGTON, NC 27216			<b>b. Job Title/Profession</b>  CEO	<b>d. Comments</b>  <b>c. Employer's Name/Specific Field</b>  CAROLINA NISSAN	
				<b>e. Election Sum to Date</b>  \$ 1,000.00	
<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"/>	1	Check		09/11/2025	\$ 1,000.00
<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 (include city, state, &amp; zip)</b>  DAN DANIELEY 4464 JIMMY BOWLES RD ELON, NC 27244-9593			<b>b. Job Title/Profession</b>  MANAGER	<b>d. Comments</b>  <b>c. Employer's Name/Specific Field</b>  BURLINGTON AIRPORT	
				<b>e. Election Sum to Date</b>  \$ 250.00	
<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"/>	1	Check		08/29/2025	\$ 250.00
<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 (include city, state, &amp; zip)</b>  CHUCK DICKSON 1021 MARTIN AVE GRAHAM, NC 27253			<b>b. Job Title/Profession</b>  ENGINEER	<b>d. Comments</b>  <b>c. Employer's Name/Specific Field</b>  CONTRACTOR	
				<b>e. Election Sum to Date</b>  \$ 300.00	
<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"/>	1	Check		09/26/2025	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 1,550.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 23,150.00

# Contributions from Individuals

Pg 5 of 16  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>		
COMMITTEE TO ELECT KELLY ALLEN							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  WAYNE EDWARDS 2201 BASIL HOLT RD BURLINGTON, NC 27217			<b>b. Job Title/Profession</b>		<b>d. Comments</b>		
			MANAGER				
			<b>c. Employer's Name/Specific Field</b>  WILLOW TREE GARAGE				
						<b>e. Election Sum to Date</b>	
						\$ 500.00	
<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"/>	1	Check		09/08/2025	\$ 500.00		
<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 (include city, state, &amp; zip)</b>  JACKIE FORTNER 7668 OAK FLAT LANE SNOW CAMP, NC 27349			<b>b. Job Title/Profession</b>		<b>d. Comments</b>		
			STAFF				
			<b>c. Employer's Name/Specific Field</b>  ACSO				
						<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"/>	1	Check		10/09/2025	\$ 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 (include city, state, &amp; zip)</b>  MICHAEL FRESHWATER 3612 S NC HWY 87 GRAHAM, NC 27253			<b>b. Job Title/Profession</b>		<b>d. Comments</b>		
			MASTER MECHANIC				
			<b>c. Employer's Name/Specific Field</b>  FRESHWATER GARAGE				
						<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"/>	1	Check		09/25/2025	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>					\$ 700.00		
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 23,150.00		

# Contributions from Individuals

Pg 6 of 16  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>			
COMMITTEE TO ELECT KELLY ALLEN					
<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
ALLEN GRANT 1022 W DAVIS ST BURLINGTON, NC 27215		CEO	e. Election Sum to Date		
Gant		c. Employer's Name/Specific Field			
		GLEN RAVEN MILLS			
			\$	3,000.00	
<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"/>	1	Check		09/08/2025	\$ 3,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b>		<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 HARRIS 2546 BARBER RD ELON, NC 27244		BOARD OF DIRECTORS	e. Election Sum to Date		
		c. Employer's Name/Specific Field			
		UNICHEM			
			\$	500.00	
<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"/>	1	Check		09/05/2025	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
NAT HARRIS 2533 PINEWAY DR BURLINGTON, NC 27215		PARTNER	e. Election Sum to Date		
		c. Employer's Name/Specific Field			
		HARRIS CROUCH INVESTMENTS			
			\$	500.00	
<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"/>	1	Check		09/10/2025	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 4,000.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 23,150.00

# Contributions from Individuals

Pg 7 of 16  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> COMMITTEE TO ELECT KELLY ALLEN					<b>2. ID Number</b>
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
LEONARD HARRISON 3161 FIELDSTONE LANE MEBANE, NC 27302			DIGITAL CREATOR	e. Election Sum to Date  \$ 200.00	
			c. Employer's Name/Specific Field		
			CAREFREE MERCHANT PROCESSING		
<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"/>	1	Check		10/23/2025	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
ISSAC HOLT III 2730 ISAAC HOLT TRAIL GRAHAM, NC 27253			OWNER	e. Election Sum to Date  \$ 500.00	
			c. Employer's Name/Specific Field		
			HOLT LUMBER COMPANY		
<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"/>	1	Check		11/01/2025	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
DAVID HORNADAY 7071 COBLE MILL RD SNOW CAMP, NC 27349			VICE PRESIDENT	e. Election Sum to Date  \$ 250.00	
			c. Employer's Name/Specific Field		
			FAIRYSTONE FABRICS		
<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"/>	1	Check		10/04/2025	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 950.00
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 23,150.00

# Contributions from Individuals

Pg 8 of 16  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>	
COMMITTEE TO ELECT KELLY ALLEN						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Job Title/Profession PRESIDENT	
FD HORNADAY P.O. BOX 790 BURLINGTON, NC 27216					c. Employer's Name/Specific Field FAIRYSTONE FABRICS	
					e. Election Sum to Date \$ 2,000.00	
<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"/>	1	Check		08/12/2025	\$ 1,000.00	
<input type="checkbox"/>	1	Check		09/10/2025	\$ 1,000.00	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Job Title/Profession PRESIDENT	
SAM HUNT 161 VIA PALMA PALM BEACH, FL 33480					c. Employer's Name/Specific Field HUNT ELECTRIC SUPPLY	
					e. Election Sum to Date \$ 1,000.00	
<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"/>	1	Check		09/26/2025	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Job Title/Profession LAW ENFORCEMENT	
DAN INGLE 5388 RASCOE RD BURLINGTON, NC 27217					c. Employer's Name/Specific Field LAW ENFORCEMENT	
					e. Election Sum to Date \$ 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"/>	1	Check		12/11/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 3,100.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 23,150.00	

# Contributions from Individuals

Amendment

Pg 9 of 16  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> COMMITTEE TO ELECT KELLY ALLEN				<b>2. ID Number</b>																			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> HERMAN JOHNSON 372 BOUNDARY ST HAW RIVER, NC 27258</td> <td><b>b. Job Title/Profession</b> PRESIDENT</td> <td colspan="3"><b>d. Comments</b></td> </tr> <tr> <td colspan="2"></td> <td><b>c. Employer's Name/Specific Field</b> BURLINGTON MECHINICIAL</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td></td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 500.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> HERMAN JOHNSON 372 BOUNDARY ST HAW RIVER, NC 27258		<b>b. Job Title/Profession</b> PRESIDENT	<b>d. Comments</b>					<b>c. Employer's Name/Specific Field</b> BURLINGTON MECHINICIAL							<b>e. Election Sum to Date</b> \$ 500.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> HERMAN JOHNSON 372 BOUNDARY ST HAW RIVER, NC 27258		<b>b. Job Title/Profession</b> PRESIDENT	<b>d. Comments</b>																				
		<b>c. Employer's Name/Specific Field</b> BURLINGTON MECHINICIAL																					
			<b>e. Election Sum to Date</b> \$ 500.00																				
<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"/>	1	Check		09/02/2025	\$ 500.00																		
<input type="checkbox"/>					\$																		
<input type="checkbox"/>					\$																		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> BRADFORD KOURY P.O. BOX 850 BURLINGTON, NC 27216</td> <td><b>b. Job Title/Profession</b> BOARD OF DIRECTORS</td> <td colspan="3"><b>d. Comments</b></td> </tr> <tr> <td colspan="2"></td> <td><b>c. Employer's Name/Specific Field</b> CAROLINA HOSIERY</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td></td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 1,000.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> BRADFORD KOURY P.O. BOX 850 BURLINGTON, NC 27216		<b>b. Job Title/Profession</b> BOARD OF DIRECTORS	<b>d. Comments</b>					<b>c. Employer's Name/Specific Field</b> CAROLINA HOSIERY							<b>e. Election Sum to Date</b> \$ 1,000.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> BRADFORD KOURY P.O. BOX 850 BURLINGTON, NC 27216		<b>b. Job Title/Profession</b> BOARD OF DIRECTORS	<b>d. Comments</b>																				
		<b>c. Employer's Name/Specific Field</b> CAROLINA HOSIERY																					
			<b>e. Election Sum to Date</b> \$ 1,000.00																				
<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"/>	1	Check		09/10/2025	\$ 1,000.00																		
<input type="checkbox"/>					\$																		
<input type="checkbox"/>					\$																		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> ERNEST KOURY P.O. BOX 850 BURLINGTON, NC 27216</td> <td><b>b. Job Title/Profession</b> BOARD OF DIRECTORS</td> <td colspan="3"><b>d. Comments</b></td> </tr> <tr> <td colspan="2"></td> <td><b>c. Employer's Name/Specific Field</b> CAROLINA HOSIERY</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td></td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 1,000.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> ERNEST KOURY P.O. BOX 850 BURLINGTON, NC 27216		<b>b. Job Title/Profession</b> BOARD OF DIRECTORS	<b>d. Comments</b>					<b>c. Employer's Name/Specific Field</b> CAROLINA HOSIERY							<b>e. Election Sum to Date</b> \$ 1,000.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> ERNEST KOURY P.O. BOX 850 BURLINGTON, NC 27216		<b>b. Job Title/Profession</b> BOARD OF DIRECTORS	<b>d. Comments</b>																				
		<b>c. Employer's Name/Specific Field</b> CAROLINA HOSIERY																					
			<b>e. Election Sum to Date</b> \$ 1,000.00																				
<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"/>	1	Check		09/10/2025	\$ 1,000.00																		
<input type="checkbox"/>					\$																		
<input type="checkbox"/>					\$																		
<b>4. Total only this Page</b> \$ 2,500.00																							
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> \$ 23,150.00																							

# Contributions from Individuals

Pg 10 of 16  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>
COMMITTEE TO ELECT KELLY ALLEN						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession BOARD OF DIRECTORS	d. Comments CAROLINA HOSIERY		
TEENA KOURY P.O. BOX 850 BURLINGTON, NC 27216						
				e. Election Sum to Date \$ 1,000.00		
<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"/>	1	Check		09/10/2025	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession BOARD OF DIRECTORS	d. Comments CAROLINA HOSIERY		
ERNEST KOURY III P.O. BOX 850 BURLINGTON, NC 27216				e. Election Sum to Date \$ 1,000.00		
<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"/>	1	Check		09/10/2025	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession TEACHER	d. Comments ABSS		
HAROLD LOVETTE P.O. BOX 582 HAW RIVER, NC 27258				e. Election Sum to Date \$ 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"/>	1	Check		09/25/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>						\$ 2,100.00
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 23,150.00

# Contributions from Individuals

Pg 11 of 16  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> COMMITTEE TO ELECT KELLY ALLEN				<b>2. ID Number</b>														
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">PARTNER</td> <td rowspan="3">e. Election Sum to Date</td> </tr> <tr> <td>LARRY MARTIN 2580 N NC HWY 49 WINDING TRAIL BURLINGTON, NC 27217</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td colspan="2">MARTIN PROPERTIES</td> </tr> <tr> <td colspan="2"></td> <td>\$ 350.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	PARTNER		e. Election Sum to Date	LARRY MARTIN 2580 N NC HWY 49 WINDING TRAIL BURLINGTON, NC 27217	c. Employer's Name/Specific Field	MARTIN PROPERTIES				\$ 350.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																
PARTNER		e. Election Sum to Date																
LARRY MARTIN 2580 N NC HWY 49 WINDING TRAIL BURLINGTON, NC 27217	c. Employer's Name/Specific Field																	
MARTIN PROPERTIES																		
		\$ 350.00																
<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"/>	1	Check		10/09/2025	\$ 350.00													
<input type="checkbox"/>					\$													
<input type="checkbox"/>					\$													
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">CPA</td> <td rowspan="3">e. Election Sum to Date</td> </tr> <tr> <td>JAMES MOSER 1772 BELMONT ALAMANCE RD BURLINGTON, NC 27215</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td colspan="2">GILLIAM COBLE &amp; MOSER</td> </tr> <tr> <td colspan="2"></td> <td>\$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	CPA		e. Election Sum to Date	JAMES MOSER 1772 BELMONT ALAMANCE RD BURLINGTON, NC 27215	c. Employer's Name/Specific Field	GILLIAM COBLE & MOSER				\$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																
CPA		e. Election Sum to Date																
JAMES MOSER 1772 BELMONT ALAMANCE RD BURLINGTON, NC 27215	c. Employer's Name/Specific Field																	
GILLIAM COBLE & MOSER																		
		\$ 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"/>	1	Check		09/26/2025	\$ 100.00													
<input type="checkbox"/>					\$													
<input type="checkbox"/>					\$													
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">PROTHETIST</td> <td rowspan="3">e. Election Sum to Date</td> </tr> <tr> <td>MICHAEL NEAL 1396 CARRICK DR BURLINGTON, NC 27215-9547</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td colspan="2">HANGER CLINIC</td> </tr> <tr> <td colspan="2"></td> <td>\$ 250.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	PROTHETIST		e. Election Sum to Date	MICHAEL NEAL 1396 CARRICK DR BURLINGTON, NC 27215-9547	c. Employer's Name/Specific Field	HANGER CLINIC				\$ 250.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																
PROTHETIST		e. Election Sum to Date																
MICHAEL NEAL 1396 CARRICK DR BURLINGTON, NC 27215-9547	c. Employer's Name/Specific Field																	
HANGER CLINIC																		
		\$ 250.00																
<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"/>	1	Check		09/29/2025	\$ 250.00													
<input type="checkbox"/>					\$													
<input type="checkbox"/>					\$													
<b>4. Total only this Page</b> \$ 700.00																		
<b>5. Total of ALL CRO-1210 Pages</b> \$ 23,150.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)																		

# Contributions from Individuals

Pg 12 of 16  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>
COMMITTEE TO ELECT KELLY ALLEN					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
			FARMER		
MIKE OWENS 4716 GREENHILL RD SNOW CAMP, NC 27349			c. Employer's Name/Specific Field	e. Election Sum to Date	
			FARMER	\$ 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"/>	1	Check		09/22/2025	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
			FARMER		
ROGER OWENS 8110 COBLE MILL RD BURLINGTON, NC 27349			c. Employer's Name/Specific Field	e. Election Sum to Date	
			FARMER	\$ 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"/>	1	Check		09/26/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <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 PAGE 2300 YORK RD BURLINGTON, NC 27215			c. Employer's Name/Specific Field	e. Election Sum to Date	
			FREEDEM WORKS	\$ 250.00	
<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"/>	1	Check		09/26/2025	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 550.00
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 23,150.00

# Contributions from Individuals

Pg 13 of 16  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	
COMMITTEE TO ELECT KELLY ALLEN					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) CHARLES PARKER 3924 GRACE MEADOW CT MEBANE, NC 27302					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession INSTRUCTOR		d. Comments	
		c. Employer's Name/Specific Field DUKE UNIVERSITY			
				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		10/11/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) SAMUEL POWELL P.O. BOX 2104 BURLINGTON, NC 27216-2104					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession CEO		d. Comments	
		c. Employer's Name/Specific Field POWELL ENTERPRISES			
				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		09/30/2025	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) DEWEY RAINY P.O. BOX 966 HAW RIVER, NC 27258					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession MICROSCOPE REPAIR		d. Comments	
		c. Employer's Name/Specific Field SOUTHERN MICROSCOPE			
				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		09/02/2025	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b> \$ 850.00					
<b>5. Total of ALL CRO-1210 Pages</b> \$ 23,150.00 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

# Contributions from Individuals

Pg 14 of 16 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>	
COMMITTEE TO ELECT KELLY ALLEN						
<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)  DAVID SCOTT 1777 FOXHALL LANE MEBANE, NC 27302			<b>b. Job Title/Profession</b>	<b>d. Comments</b>		
			SALES			
			<b>c. Employer's Name/Specific Field</b>			
			JDS			
				<b>e. Election Sum to Date</b>		
	\$ 250.00					
<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"/>	1	Check		09/05/2025	\$ 250.00	
<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)  RONNIE STALLINGS 6330 DAVID MOORE RD BURLINGTON, NC 27217			<b>b. Job Title/Profession</b>	<b>d. Comments</b>		
			EVENT PLANNER			
			<b>c. Employer's Name/Specific Field</b>			
			CADILLAC EVENT CENTER			
				<b>e. Election Sum to Date</b>		
	\$ 700.00					
<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"/>	1	Check		09/30/2025	\$ 700.00	
<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)  KAREN STRAWTHER 1237 PEBBLE DR GRAHAM, NC 27253			<b>b. Job Title/Profession</b>	<b>d. Comments</b>		
			IT			
			<b>c. Employer's Name/Specific Field</b>			
			UNC			
				<b>e. Election Sum to Date</b>		
	\$ 250.00					
<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"/>	1	Check		09/22/2025	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 1,200.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 23,150.00	

# Contributions from Individuals

Pg 15 of 16  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> COMMITTEE TO ELECT KELLY ALLEN					<b>2. ID Number</b>
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) AVERY THOMAS 217 ENGLEMAN AVE BURLINGTON, NC 27215					b. Job Title/Profession CPA  c. Employer's Name/Specific Field THOMAS CHANDLER THOMAS HINSHAW  d. Comments  e. Election Sum to Date \$ 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"/>	1	Check		09/30/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) DON TICHEY P.O. BOX 220 ALAMANCE, NC 27201-0220					b. Job Title/Profession CEO  c. Employer's Name/Specific Field TICHEY TRAIN GROUP  d. Comments  e. Election Sum to Date \$ 250.00
<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"/>	1	Check		09/23/2025	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) CAROLYN TIPPETT P.O. BOX 334 HAW RIVER, NC 27258					b. Job Title/Profession IT SPECIALIST  c. Employer's Name/Specific Field UNICHEM  d. Comments  e. Election Sum to Date \$ 250.00
<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"/>	1	Check		10/04/2025	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 600.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 23,150.00

# Contributions from Individuals

Pg 16 of 16  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> COMMITTEE TO ELECT KELLY ALLEN				<b>2. ID Number</b>													
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> JERRY WARREN 2307 DEEP CREEK CHURCH RD BURLINGTON, NC 27217-7812</td> <td><b>b. Job Title/Profession</b> CEO</td> <td colspan="3"><b>d. Comments</b></td> </tr> <tr> <td colspan="2"></td> <td><b>c. Employer's Name/Specific Field</b> C&amp;J UTILITIES</td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 500.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> JERRY WARREN 2307 DEEP CREEK CHURCH RD BURLINGTON, NC 27217-7812		<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>					<b>c. Employer's Name/Specific Field</b> C&J UTILITIES	<b>e. Election Sum to Date</b> \$ 500.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> JERRY WARREN 2307 DEEP CREEK CHURCH RD BURLINGTON, NC 27217-7812		<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>														
		<b>c. Employer's Name/Specific Field</b> C&J UTILITIES	<b>e. Election Sum to Date</b> \$ 500.00														
<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"/>	1	Check		09/30/2025	\$ 500.00												
<input type="checkbox"/>					\$												
<input type="checkbox"/>					\$												
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> BARRY WHITESELL 1514 MELCHOR RD ALBEMARLE, NC 28001-2927</td> <td><b>b. Job Title/Profession</b> STOCKER</td> <td colspan="3"><b>d. Comments</b></td> </tr> <tr> <td colspan="2"></td> <td><b>c. Employer's Name/Specific Field</b> LOWE'S HOME IMPROVEMENT</td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 500.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> BARRY WHITESELL 1514 MELCHOR RD ALBEMARLE, NC 28001-2927		<b>b. Job Title/Profession</b> STOCKER	<b>d. Comments</b>					<b>c. Employer's Name/Specific Field</b> LOWE'S HOME IMPROVEMENT	<b>e. Election Sum to Date</b> \$ 500.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> BARRY WHITESELL 1514 MELCHOR RD ALBEMARLE, NC 28001-2927		<b>b. Job Title/Profession</b> STOCKER	<b>d. Comments</b>														
		<b>c. Employer's Name/Specific Field</b> LOWE'S HOME IMPROVEMENT	<b>e. Election Sum to Date</b> \$ 500.00														
<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"/>	1	Check		09/17/2025	\$ 500.00												
<input type="checkbox"/>					\$												
<input type="checkbox"/>					\$												
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> GEORGE WORKMAN 2114 US HWY 70 MEBANE, NC 27302</td> <td><b>b. Job Title/Profession</b> CEO</td> <td colspan="3"><b>d. Comments</b></td> </tr> <tr> <td colspan="2"></td> <td><b>c. Employer's Name/Specific Field</b> CONTRACTOR</td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 100.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> GEORGE WORKMAN 2114 US HWY 70 MEBANE, NC 27302		<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>					<b>c. Employer's Name/Specific Field</b> CONTRACTOR	<b>e. Election Sum to Date</b> \$ 100.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> GEORGE WORKMAN 2114 US HWY 70 MEBANE, NC 27302		<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>														
		<b>c. Employer's Name/Specific Field</b> CONTRACTOR	<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"/>	1	Check		10/03/2025	\$ 100.00												
<input type="checkbox"/>					\$												
<input type="checkbox"/>					\$												
<b>4. Total only this Page</b> \$ 1,100.00																	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100) \$ 23,150.00																	

**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>		<b>2. ID Number</b>		
COMMITTEE TO ELECT KELLY ALLEN				
<b>3. Contributor Information</b> <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Committee</b> <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	<b>d. Comments</b>	
COMMITTEE TO ELECT SHERIFF JOHNSON 219 WEST ELM STREET GRAHAM, NC 27253		<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b>	
		Alamance	\$ 500.00	
			\$	
<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>
1	Check		09/29/2025	\$ 500.00
				\$
				\$
<b>4. Total only this Page</b>				\$ 500.00
<b>5. Total of ALL CRO-1230 Pages</b> (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 500.00

CRO-1230

NC State Board of Elections

April 2007

# Disbursements

Amendment  
Pg 1 of 3  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> COMMITTEE TO ELECT KELLY ALLEN		<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 <table border="1"> <tr> <td rowspan="2">a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">c. Level Registered (Specify)</td> </tr> <tr> <td rowspan="2">584/GRILL 7100 HUFFMAN MILL RD BURLINGTON, NC 27215</td> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County:</td> </tr> <tr> <td><input type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality:</td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date \$ 2,089.34</td> </tr> </table>			a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments	c. Level Registered (Specify)		584/GRILL 7100 HUFFMAN MILL RD BURLINGTON, NC 27215	<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<input type="checkbox"/> State	<input type="checkbox"/> Municipality:			e. Election Sum to Date \$ 2,089.34
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments													
	c. Level Registered (Specify)														
584/GRILL 7100 HUFFMAN MILL RD BURLINGTON, NC 27215	<input type="checkbox"/> Federal	<input type="checkbox"/> County:													
	<input type="checkbox"/> State	<input type="checkbox"/> Municipality:													
		e. Election Sum to Date \$ 2,089.34													
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks										
1	Debit Card	O	10/09/2025	\$ 2,089.34	CAMPAIGN EVENT										
				\$											
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			b. Coordinated Committee Name	d. Comments											
a. Full Name, Mailing Address & Phone (include city, state, & zip)  ALAMANCE BOARD OF ELECTIONS 1128 SOUTH MAIN ST GRAHAM, NC 27253			c. Level Registered (Specify)	e. Election Sum to Date \$ 84.00											
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks										
1	Check	O	12/18/2025	\$ 84.00	REGISTRATION FEE										
				\$											
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			b. Coordinated Committee Name	d. Comments											
a. Full Name, Mailing Address & Phone (include city, state, & zip)  ALAMANCE NEWS 114 W ELM ST GRAHAM, NC 27253			c. Level Registered (Specify)	e. Election Sum to Date \$ 529.00											
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks										
1	Check	A	12/24/2025	\$ 529.00	ADVERTISING										
				\$											
<b>5. Total only this Page</b>					\$ 2,702.34										
<b>6. Total of ALL CRO-1310 Pages</b> (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)					\$ 6,106.05										
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)															
A* - Media		B* - Printing		C* - Fundraising											
E - Salaries		F* - Equipment		G - Political Party											
I - Postage		J - Penalties		K* - Office Expenses											
O* Other				D - To Another Candidate											
				H* - Holding Public Office Expenses											
				Q* - Donation to Legal Expense Fund											
* Codes require detailed explanation in required remarks field (k)															

# Disbursements

Amendment  
Pg 2 of 3  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> COMMITTEE TO ELECT KELLY ALLEN		<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																									
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<b>5. Total only this Page</b> \$ 2,536.00																									
<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> \$ 6,106.05																									
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)																									
A* - Media		B* - Printing		C* - Fundraising																					
E - Salaries		F* - Equipment		G - Political Party																					
I - Postage		J - Penalties		K* - Office Expenses																					
O* Other				D - To Another Candidate																					
				H* - Holding Public Office Expenses																					
				Q* - Donation to Legal Expense Fund																					
<i>* Codes require detailed explanation in required remarks field (k)</i>																									

# Disbursements

Amendment

Pg 3 of 3  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> COMMITTEE TO ELECT KELLY ALLEN		<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 <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone <i>(include city, state, &amp; zip)</i>  MARKELL PUBLISHING 718 E DAVIS ST BURLINGTON, NC 27215</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2" rowspan="2">           c. Level Registered (Specify)  <input type="checkbox"/> Federal <input type="checkbox"/> County:  <input type="checkbox"/> State <input type="checkbox"/> Municipality:         </td> <td rowspan="2">e. Election Sum to Date  \$ 81.13</td> </tr> <tr> <td></td> </tr> </table>			a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>  MARKELL PUBLISHING 718 E DAVIS ST BURLINGTON, NC 27215	b. Coordinated Committee Name	d. Comments	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  \$ 81.13	
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>  MARKELL PUBLISHING 718 E DAVIS ST BURLINGTON, NC 27215	b. Coordinated Committee Name	d. Comments							
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  \$ 81.13							
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
1	Debit Card	B	09/15/2025	\$ 81.13	CAMPAIGN CARDS				
				\$					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove									
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>  PROMOTIONAL APPAREL 1531 EAST MAIN ST MEBANE, NC 27302	b. Coordinated Committee Name	d. Comments							
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  \$ 396.58							
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
1	Check	O	09/05/2025	\$ 396.58	CAMPAIGN SHIRTS				
				\$					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove									
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>  USPS 105 ROXBORO ST HAW RIVER, NC 27258	b. Coordinated Committee Name	d. Comments							
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  \$ 390.00							
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
1	Debit Card	I	09/13/2025	\$ 390.00					
				\$					
<b>5. Total only this Page</b>					\$ 867.71				
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 6,106.05				
(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)									
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)									
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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

Page 1 of 1Amendment  
 Yes  No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number		
COMMITTEE TO ELECT KELLY ALLEN						
3. Payee Information						
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	1	Debit Card	O	10/09/2025	\$ 47.98	BALLONS FOR CAMPAIGN EVENT
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Debit Card	O	10/08/2025	\$ 48.04	DONOR'S NAMES FOR EVENT
<input type="checkbox"/> Remove						
4. Total only this Page				\$ 96.02		
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>				\$ 96.02		
6. Purpose Codes (List detailed expenditure code in (d) above)						
E - Salaries	F* - Equipment	B* - Printing	C* - Fundraising	D - To Another Candidate		
I - Postage	J - Penalties	G - Political Party	H* - Holding Public Office Expenses			
O* - Other		K* - Office Expenses	Q* - Donations to Legal Expense Fund			

CRO-1315

NC State Board of Elections

December 2009

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