
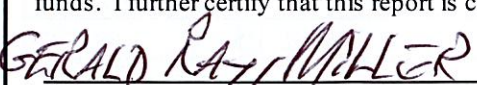
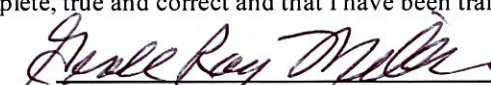


Disclosure Report Cover

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 | |
| KEEP KRISTIE CULLER CLERK OF COURT | | | | |
| b. Mailing Address (include City, State and Zip Code) | | | d. Date Filed | |
| 108 HOSKINS CIRCLE BURLINGTON, NC 27215 | | | 04/19/2026 | |
| | | | e. Phone Number | |
| | | | (336) 684-6584 | |
| 2. Report Year | 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name | |
| 2026 | 01/01/2026 | 02/14/2026 | GERALD RAY MILLER | |
| 6. Type of Committee (Check One) | | 9. Type of Report (check only one type of report from one category) | | |
| <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund | | Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special | | |
| | | State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special | | |
| 7. Type of Fund (if applicable, check one) | | 10. Special Report Name | | |
| <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other: | | | | |
| 3. Account Information | | 3. Account Information | | |
| a. Financial Institution Full Name | | a. Financial Institution Full Name | | |
| FIRST HORIZON BANK | | | | |
| b. Purpose | c. Account Code | b. Purpose | c. Account Code | |
| FOR RECEIPTS AND EXPENSES | FH01 | | | |
| | d. Period Begin Balance | | d. Period Begin Balance | |
| | \$ 1,997.00 | | | |
|  | | | | |
| 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 | | | | |
|  Printed Name of Signer | |  Signature of Appointed Treasurer | | 04/19/2026 Date |
| FOR OFFICE USE ONLY | | | | |
| Date Received: | <u>4/20/2026</u> | Employee: | <u>AK</u> | Delivery Method |
| Date Postmarked: | _____ | Employee: | _____ | <input type="checkbox"/> Normal Mail |
| Date Scanned: | <u>4/20/2026</u> | Employee: | <u>AK</u> | <input type="checkbox"/> Registered Mail |
| Date Data Entered: | _____ | Employee: | _____ | <input checked="" type="checkbox"/> Hand Delivered |
| | | | | <input type="checkbox"/> Electronically Filed |
| | | | | <input type="checkbox"/> Signer has not received mandatory training |
| Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes. | | | | |

Detailed Summary

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

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

| 1. Committee Full Name (and Fund if applicable) | 2. Type of Report | 3. ID Number | |
|--|--------------------|-----------------------------|---------------------------|
| KEEP KRISTIE CULLER CLERK OF COURT | 2026 First Quarter | | |
| Start of Election Cycle: January 1, <u>2025</u> | | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 0.00 | \$ 0.00 |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 0.00 | \$ 0.00 |
| 6) Contributions from Individuals | (CRO-1210) | \$ 4,936.67 | \$ 5,436.67 |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ 0.00 | \$ 0.00 |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ 0.00 | \$ 0.00 |
| 9) Loan Proceeds | (CRO-1410) | \$ 0.00 | \$ 0.00 |
| 10) Refunds/Reimbursements to the Committee | (CRO-1240) | \$ 0.00 | \$ 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) | | \$ 4,936.67 | \$ 5,436.67 |
| EXPENDITURES | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 2,500.00 | \$ 2,500.00 |
| 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) | \$ 33.80 | \$ 33.80 |
| 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) | \$ 2,036.67 | \$ 2,536.67 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 4,570.47 | \$ 5,070.47 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 366.20 | \$ 366.20 |
| ADDITIONAL INFORMATION | | | |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ 0.00 | |
| 21) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ 0.00 | |
| 22) Debts and Obligations owed by the Committee | (CRO-1610) | \$ 0.00 | |
| 23) Debts and Obligations owed to the Committee | (CRO-1620) | \$ 0.00 | |
| 24) Account Transfers Within the Committee | (CRO-1720) | \$ 0.00 | |
| 25) Administrative Support | (CRO-1710) | \$ 0.00 | \$ 0.00 |
| 26) Forgiven Loans | (CRO-1440) | \$ 0.00 | \$ 0.00 |
| 27) 48-Hour Notice Reports Sum | (CRO-2220) | \$ 0.00 | \$ 0.00 |
| 28) Contributions to be Refunded | (CRO-1215) | \$ 0.00 | \$ 0.00 |

Contributions from Individuals

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 |
| KEEP KRISTIE CULLER CLERK OF COURT | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| JOHNNY BAKATSIAS 142 N GRAHAM HOPEDALE RD BURLINGTON, NC 27215 (336) 227-1448 | | | OWNER WESTERN STEAKHOUSE | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | WESTERN STEAK HOUSE | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 300.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | In-Kind | FOOD AND BEVERAGES FOR CANDIDATE'S MEET | 02/10/2026 | \$ 300.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| ROBERT BRADY 5914 STONEY MOUNTAIN RD BURLINGTON, NC 27217 | | | NOT WORKING | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | NOT WORKING | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 200.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | Credit Card | | 01/12/2026 | \$ 200.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| KRISTIE CULLER 118 HOSKINS CIRCLE BURLINGTON, NC 27215 (336) 684-6584 | | | COURT CLERK | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | CLERK OF SUPERIOR COURT | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 17,005.55 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | In-Kind | 250 3 IN. ROUND CAMPAIGN BUTTONS | 01/13/2026 | \$ 253.53 | |
| <input type="checkbox"/> | FH01 | In-Kind | FIVE CAMPAIGN HATS, KBETHOS HATS | 01/17/2026 | \$ 53.30 | |
| <input type="checkbox"/> | FH01 | In-Kind | 19 LONG SLEEVE CAMPAIGN SHIRTS AND | 01/17/2026 | \$ 220.95 | |
| 4. Total only this Page | | | | | \$ 1,027.78 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 4,936.67 | |

Contributions from Individuals

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 | |
| KEEP KRISTIE CULLER CLERK OF COURT | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| KRISTIE CULLER 118 HOSKINS CIRCLE BURLINGTON, NC 27215 (336) 684-6584 | | | COURT CLERK | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | CLERK OF SUPERIOR COURT | | e. Election Sum to Date | |
| | | | | \$ 17,005.55 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (m m/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | In-Kind | CAMPAIGN HATS, SHIRTS AND DOOR | 01/23/2026 | \$ 736.78 | |
| <input type="checkbox"/> | FH01 | In-Kind | PRINTING ON 22 CAMPAIGN PROVIDED | 01/29/2026 | \$ 322.11 | |
| <input type="checkbox"/> | FH01 | In-Kind | PHOTOGRAPHY FOR CAMPAIGN ADS. | 02/09/2026 | \$ 150.00 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| CHARLES DAVIS 207 PEBBLE BEACH DR MEBANE, NC 27302 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | DAVIS AND HUMBERT ATTORNEYS AT LAW | | e. Election Sum to Date | |
| | | | | \$ 1,000.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (m m/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | Check | | 01/15/2026 | \$ 1,000.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| MARK DOCKERY 1635 SANDY CROSS RD BURLINGTON, NC 27217 | | | DEPUTY SHERIFF | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | ALAMANCE COUNTY SHERIFF'S DEPT. | | e. Election Sum to Date | |
| | | | | \$ 100.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (m m/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | Credit Card | | 01/10/2026 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 2,308.89 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 4,936.67 | |

Contributions from Individuals

Amendment

Yes No

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

| | | | | | | |
|--|------------------------|---------------------------|--|-----------------------------|--------------------------------|---------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number |
| KEEP KRISTIE CULLER CLERK OF COURT | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| MICHEL HABIT 1617 LUCY LN CHAPEL HILL, NC 27516 | | | NOT WORKING | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | NOT WORKING | | 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"/> | FH01 | Credit Card | | 01/12/2026 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| DWAYNE JANEY 2572 RUSSELL MCPHERSON RD BURLINGTON, NC 27215 | | | NOT WORKING | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | NOT WORKING | | 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"/> | FH01 | Check | | 01/12/2026 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| JOSEPH MCPHERSON 3513 MILESVILLE RD ELON, NC 27244 | | | DEPUTY SHERIFF | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | ALAMANCE COUNTY SHERIFF'S DEPT | | 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"/> | FH01 | Credit Card | | 01/07/2026 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 300.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 4,936.67 | |

Contributions from Individuals

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 | |
| KEEP KRISTIE CULLER CLERK OF COURT | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| GERALD RAY MILLER 103 ALYSSA DR GIBSONVILLE, NC 27249 (336) 269-1043 | | | NOT WORKING | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | NOT WORKING | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (m m/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | Check | | 02/03/2026 | \$ 500.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| JOSHUA MILLER 412 ALAMANCE RD BURLINGTON, NC 27215 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | MILLER LAW ATTORNEY AT LAW | | e. Election Sum to Date | |
| | | | | | \$ 200.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (m m/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | Credit Card | | 02/04/2026 | \$ 200.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| TAMMY RICHARDSON P O BOX 1037 GRAHAM, NC 27253 | | | NOT WORKING | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | NOT WORKING | | e. Election Sum to Date | |
| | | | | | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (m m/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | FH01 | Credit Card | | 01/16/2026 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 800.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 4,936.67 | |

Contributions from Individuals

Amendment

Yes No

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

| | | | | | | |
|---|------------------------|---------------------------|--|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| KEEP KRISTIE CULLER CLERK OF COURT | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| JACOB WRIGHT 3521 LASHBROOKE WAY LOUISVILLE, TN 37777 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | DAVIS AND HUMBERT ATTORNEYS AT LAW | | 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"/> | FH01 | Check | | 01/15/2026 | \$ 500.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 500.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 4,936.67 | |

Disbursements

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

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

| | | | | | |
|--|---------------------------|-----------------------------|--|---------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| KEEP KRISTIE CULLER CLERK OF COURT | | | | | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Coordinated Committee Name | | d. Comments |
| ANDREW WADE 105A E JJ DR GREENSBORO, NC 27406 (336) 292-4242 | | | | | |
| | | | c. Level Registered (Specify) | | |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date |
| | | | | | \$ 2,500.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| FH01 | Draft | A | 02/08/2026 | \$ 2,500.00 | ELECTRONIC |
| | | | | \$ | BILLBOARD CAMPAIGN |
| 5. Total only this Page | | | | | \$ 2,500.00 |
| 6. Total of ALL CRO-1310 Pages | | | | | \$ 2,500.00 |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> | | | | | |
| <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | |
| 7. Purpose Codes (List detailed expenditure code in (h.) above) | | | | | |
| A* - Media | B* - Printing | C* - Fundraising | D - To Another Candidate | | |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Public Office Expenses | | |
| I - Postage | J - Penalties | K* - Office Expenses | Q* - Donation to Legal Expense Fund | | |
| O* Other | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |

Aggregated Non-Media Expenditures

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

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

Committee Name: **KEEP KRISTIE CULLER CLERK OF COURT**

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 <input type="checkbox"/> Remove | FH01 | Electric Funds Tran | O | 01/07/2026 | \$ 4.30 | PROCESSING FEE FOR CAMPAIGN |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | FH01 | Electric Funds Tran | O | 01/10/2026 | \$ 4.30 | PROCESSING FEE FOR CAMPAIGN |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | FH01 | Electric Funds Tran | O | 01/12/2026 | \$ 4.30 | PROCESSING FEE FOR CAMPAIGN |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | FH01 | Electric Funds Tran | O | 01/13/2026 | \$ 8.30 | PROCESSING FEE FOR CAMPAIGN |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | FH01 | Electric Funds Tran | O | 01/16/2026 | \$ 4.30 | PROCESSING FEE FOR CAMPAIGN |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | FH01 | Electric Funds Tran | O | 02/04/2026 | \$ 8.30 | PROCESSING FEE FOR CAMPAIGN |

4. Total only this Page \$ 33.80

5. Total of ALL CRO-1315 Pages \$ 33.80
(This line must be on the 1st of Detailed Summary Page CRO-1100)

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

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

In-Kind Contributions

Pg 1 of 1

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

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

| | | |
|---|--|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number |
| KEEP KRISTIE CULLER CLERK OF COURT | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Type of Contributor | c. Comments |
| JOHNNY BAKATSIAS 142 N GRAHAM HOPEDALE RD BURLINGTON, NC 27215 (336) 227-1448 | <input checked="" type="checkbox"/> Individual | |
| | <input type="checkbox"/> Candidate | |
| | <input type="checkbox"/> Party | |
| | <input type="checkbox"/> PAC | |
| | <input type="checkbox"/> Referendum | d. Election Sum to Date |
| | <input type="checkbox"/> Other Receipt Source | \$ 300.00 |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| FOOD AND BEVERAGES FOR CANIDATE'S MEET AND GREET | 02/10/2026 | \$ 300.00 |
| | | \$ |
| | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Type of Contributor | c. Comments |
| KRISTIE CULLER 118 HOSKINS CIRCLE BURLINGTON, NC 27215 (336) 684-6584 | <input checked="" type="checkbox"/> Individual | |
| | <input type="checkbox"/> Candidate | |
| | <input type="checkbox"/> Party | |
| | <input type="checkbox"/> PAC | |
| | <input type="checkbox"/> Referendum | d. Election Sum to Date |
| | <input type="checkbox"/> Other Receipt Source | \$ 17,005.55 |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| 250 3 IN. ROUND CAMPAIGN BUTTONS | 01/13/2026 | \$ 253.53 |
| FIVE CAMPAIGN HATS, KBETHOS HATS | 01/17/2026 | \$ 53.30 |
| 19 LONG SLEEVE CAMPAIGN SHIRTS AND THREE PULLOVERS, BLANKSHIRTS.COM | 01/17/2026 | \$ 220.95 |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Type of Contributor | c. Comments |
| KRISTIE CULLER 118 HOSKINS CIRCLE BURLINGTON, NC 27215 (336) 684-6584 | <input checked="" type="checkbox"/> Individual | |
| | <input type="checkbox"/> Candidate | |
| | <input type="checkbox"/> Party | |
| | <input type="checkbox"/> PAC | |
| | <input type="checkbox"/> Referendum | d. Election Sum to Date |
| | <input type="checkbox"/> Other Receipt Source | \$ 17,005.55 |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| CAMPAIGN HATS, SHIRTS AND DOOR MAGNETS, ACCELERATED GRAPHICS, LLC | 01/23/2026 | \$ 736.78 |
| PRINTING ON 22 CAMPAIGN PROVIDED GARMENTS, ACCELERATED GRAPHICS, LLC | 01/29/2026 | \$ 322.11 |
| PHOTOGRAPHY FOR CAMPAIGN ADS, CASANDRA BERENS PHOTOGRAPHY | 02/09/2026 | \$ 150.00 |
| 4. Total only this Page | | \$ 2,036.67 |
| 5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100) | | \$ 2,036.67 |