

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 PETER BOYKIN FOR NC	c. ID Number STA-60RAB-C-001
b. Mailing Address (include City, State and Zip Code) 2060 STONE STREET EXT LOT 2 MEBANE, NC 27302	d. Date Filed 07/10/2026
	e. Phone Number (336) 605-8353

2. Report Year 2026	3. Period Start Date (mm/dd/yy) 01/01/2026	4. Period End Date (mm/dd/yy) 06/30/2026	5. Treasurer Full Name PETER BOYKIN
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign	☐ Party	Municipal	State/County
☐ Joint Fundraiser	☐ PAC	☐ Organizational	☐ Organizational
☐ Referendum	☐ Legal Expense Fund	☐ Thirty-five day	☐ Quarterly
7. Type of Fund (if applicable, check one)		☐ Pre-primary	☐ First
☐ "Booster Fund"		☐ Pre-election	☐ Second
☐ Building Fund		☐ Pre-runoff	☐ Third
☐ Presidential Election Year Candidates Fund		☐ Semi-annual	☐ Fourth
☐ NC Public Campaign Financing Fund		☐ Mid Year	☐ Semi-annual
☐ Other:		☐ Year End	☒ Mid Year
8. Number of Fundraisers this Report		☐ Final	☐ Year End
0		☐ Special	☐ Final
		☐ Special	☐ Special

3. Account Information		3. Account Information	
a. Financial Institution Full Name TRULIANT FEDERAL CREDIT UNION		a. Financial Institution Full Name	
b. Purpose ACCOUNT FOR PETER BOYKIN FOR NC CAMPAIGN	c. Account Code PRBBANK	b. Purpose	c. Account Code
	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

Peter Boykin Printed Name of Signer [Signature] Signature of Appointed Treasurer 07/10/2026 Date

FOR OFFICE USE ONLY

Date Received: 7/13/26 Employee: WLC Delivery Method
☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed

Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____
 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	
PETER BOYKIN FOR NC		2026 Second Quarter		STA-60RAB-C-001	
Start of Election Cycle: January 1, 2025			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 155.13		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 0.00		\$ 239.13	
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)		\$ 0.00		\$ 239.13	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 145.00		\$ 229.00	
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)		\$ 0.00		\$ 0.00	
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)		\$ 145.00		\$ 229.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 10.13		\$ 10.13	
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	

Disbursements

Amendment
Pg 1 of 1 ☐ Yes ☒ 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	
PETER BOYKIN FOR NC					STA-60RAB-C-001	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information				☐ Add ☐ Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) MINUTEMAN PRESS INTERNATIONAL INC 236 RIVERBEND RD GRAHAM, NC 27253				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				☐ Federal ☐ County: ☐ State ☐ Municipality:		
						\$ 145.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
PRBBANK	Debit Card	B	02/16/2026	\$ 145.00	CAR MAGNETS	
				\$		
5. Total only this Page					\$ 145.00	
6. Total of ALL CRO-1310 Pages						
<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>					\$ 145.00	
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)						

Contributions from Individuals

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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	
PETER BOYKIN FOR NC				STA-60RAB-C-001	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
BOB CRAYTON 5761 NC 87 Hwy GRAHAM, NC 27253			RETIRED - UNEMPLOYED		
			c. Employer's Name/Specific Field		
			RETIRED - UNEMPLOYED		
			e. Election Sum to Date		
			\$		130.13
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	PRBBANK	Electric Funds Tran		02/07/2026	\$ 52.05
☐	PRBBANK	Electric Funds Tran		02/09/2026	\$ 78.08
☐					\$
4. Total only this Page					\$ 130.13
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 130.13

CRO-1210

NC State Board of Elections

April 2007