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
CAMPAIGN TO ELECT RAMONA ALLEN	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
2711 WHITE OAKS DRIVE BURLINGTON,NC 27215	08/18/2026
	e. Phone Number
	(336) 437-4832

RECEIVED
AUG 24 2026
ALAMANCE COUNTY
BOARD OF ELECTIONS

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	09/18/2025	12/31/2025	RAMONA ALLEN

6. Type of Committee (Check One)

- ☐ Candidate Campaign
- ☐ PAC
- ☐ Independent Expenditure
- ☐ Legal Expense Fund
- ☐ Party
- ☐ Referendum
- ☐ Joint Fundraiser

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

- ☐ "Booster Fund"
- ☐ Building 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
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☑ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	
WOODFOREST NATIONAL	
b. Purpose	**c. Account Code**
CAMPAIGNRELATED ACTIVITY	RA26
	d. Period Begin Balance
	$ 315.00

11. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	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 of Elections.

Brana Clark		8/18/2026
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	8/24/26	Employee:	WL6	Delivery Method
Date Postmarked:		Employee:		☐ Normal Mail
Date Scanned:	8/26/26	Employee:		☐ Registered Mail
Date Data Entered:		Employee:		☑ Hand Delivered
				☐ Electronically Filed
				☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment ☒ 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
CAMPAIGN TO ELECT RAMONA ALLEN	2025 Year End Semi-Annual	

Start of Election Cycle: January 1,2023		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 315.00	$ 315.00
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 966.00	$ 966.00
6) Contributions from Individuals	*(CRO-1210)*	$ 3,150.00	$ 3,150.00
7) Contributions from Political Party Committees	*(CRO-1220)*	$ 500.00	$ 500.00
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
11 e) 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)*		$ 4,616.00	$ 4,616.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 3,581.27	$ 3,581.27
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$ 0.00	$ 0.00
13c) Coordinated Party Expenditures	*(CRO-1310)*	$ 0.00	$ 0.00
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 328.96	$ 328.96
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)*	$ 500.00	$ 500.00
18) TOTAL EXPENDITURES *(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)*		$ 4,410.23	$ 4,410.23
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*		$ 520.77	$ 520.77
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

In-Kind Contributions

Amendment

Pg 1 of 1 ☒ Yes ☐ 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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
NCDP NC DEMOCRATS 220 HILLSBOROUGH ST RALEIGH, NC 27603	☐ Individual ☐ Candidate ☒ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $ 500.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
VOTE BUILDER	09/18/2025	$ 500.00
		$
		$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 500.00

Aggregated Non-Media Expenditures

Amendment ☒ 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
CAMPAIGN TO ELECT RAMONA 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
☐ Add ☐ Remove	RA26	Debit Card	O	12/09/2025	$ 25.81	CAMPAING ITEMS
☐ Add ☐ Remove	RA26	Electric Funds Tran	O	11/04/2025	$ 27.00	TSHIRT
☐ Add ☐ Remove	RA26	Debit Card	O	12/19/2025	$ 41.27	FOOD R EVENT
☐ Add ☐ Remove	RA26	Electric Funds Tran	O	12/17/2025	$ 25.00	DECORATION FOR EVENT
☐ Add ☐ Remove	RA26	Debit Card	O	10/19/2025	$ 10.68	EVENT FOOD
☐ Add ☐ Remove	RA26	Debit Card	O	11/09/2025	$ 29.89	FLYERS
☐ Add ☐ Remove	RA26	Debit Card	O	11/09/2025	$ 29.89	CAMPING PRINTS
☐ Add ☐ Remove	RA26	Debit Card	O	11/09/2025	$ 37.79	EVENT ADVERTISING
☐ Add ☐ Remove	RA26	Debit Card	O	11/21/2025	$ 39.48	EVENT ADVERTISING
☐ Add ☐ Remove	RA26	Debit Card	O	12/17/2025	$ 3.53	EVENT ITEM
☐ Add ☐ Remove	RA26	Debit Card	O	12/17/2025	$ 23.97	SHIRTS CAMPAING
☐ Add ☐ Remove	RA26	Debit Card	O	12/18/2025	$ 23.97	BLANK TSHIRTS
☐ Add ☐ Remove	RA26	Debit Card	O	10/19/2025	$ 10.68	FOOD FOR EVENT

4. Total only this Page	$ 328.96
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 328.96

6. Purpose Codes (List detailed expenditure code in (d) above)

	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* - Donations to Legal Expense Fund**
O* - Other			

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

Disbursements

Amendment

 ☒ 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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ 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)	b. Coordinated Committee Name	d. Comments
U-PRINTINGX 8000 HASKELL AVE VANNUYS, CA 91406	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 994.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	12/23/2025	$ 180.70	PALM CARDS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
VISTAGO PRINT LLC 6706 LOHMAN FORD RD LAGO VISTA, TX 78645	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 436.77

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	12/17/2025	$ 436.77	CAMPAIGN CARDS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
NATASHA WOODS 2305 SOUTH JIM MINOR ROAD MEBANE, NC 27302	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 165.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Electric Funds Tran	O	12/17/2025	$ 165.00	FOOD FOR THE EVENT
				$	

5. Total only this Page	$ 782.47
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,581.27

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)**

Disbursements

 Amendment ☒ 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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ 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)	b. Coordinated Committee Name	d. Comments
U-PRINTINGX 8000 HASKELL AVE VANNUYS, CA 91406	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 994.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	11/19/2025	$ 169.05	BANNER
RA26	Debit Card	O	11/26/2025	$ 169.05	POST CARD CAMPAING

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
U-PRINTINGX 8000 HASKELL AVE VANNUYS, CA 91406	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 994.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	11/27/2025	$ 169.16	YARD SIGNS
RA26	Debit Card	O	11/29/2025	$ 102.25	CAMPAIGN CARDS

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
U-PRINTINGX 8000 HASKELL AVE VANNUYS, CA 91406	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 994.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	12/07/2025	$ 102.52	CAMPAIGN CARDS
RA26	Debit Card	O	12/13/2025	$ 102.25	CAR MAGNENTS FOR CAMPAING

5. Total only this Page	$ 814.28
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,581.27

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)**

Disbursements

Amendment

 ☒ 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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ 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)	b. Coordinated Committee Name	d. Comments
OFFICE DEPOT 1825 SOUTH CHURCH ST BURLNGTON, NC 27215	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 335.19

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	11/23/2025	$ 105.78	PRINT MEDIA
RA26	Debit Card	O	11/28/2025	$ 92.36	PRINT MEDIA

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
RACE TOP PRINT 74 E GLENWOOD AVE SMYRNA, DE 19977	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 128.09

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	11/13/2025	$ 128.09	Campaign Advertisement
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
ROSES 2236 NORTH CHURCH STREET BURLINGTON, NC 27215	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 110.01

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	12/08/2025	$ 58.54	EVENT
				$	

5. Total only this Page	$ 384.77
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,581.27

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)**

Disbursements

 Amendment ☒ 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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ 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)	b. Coordinated Committee Name	d. Comments
GIVE BUTTER 2810 NORTH CHURCH STREET 53748 WILMINGTON, DE 19802	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 205.45

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	12/31/2025	$ 205.45	PLATFORM FEES
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
HARRIS TEETER 2727 SOUTH CHURCH STREET BURLNGTON, NC 27215	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 84.33

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	12/21/2025	$ 73.65	FOOD AND DRINK FOR EVENT
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
NATASHA WOODS 2305 S JIM MINOR RD MEBANE, NC 27302	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 165.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Electric Funds Tran	O	12/17/2025	$ 165.00	FOOD FOR THE EVENT
				$	

5. Total only this Page	$ 444.10
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,581.27

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)**

Disbursements

 Amendment ☒ 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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ 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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
APRIL CLARK 4392 CANDANCE RIGDE CT GREENSBORO, NC 27406		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 99.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Electric Funds Tran	O	10/30/2025	$ 72.00	DTF TSHIRTS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
JACKIE DARK 1040 FLATS AVE #26 MEBANE, NC 27302		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 80.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Electric Funds Tran	O	12/05/2025	$ 80.00	FOOD/DECORATIONS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
FOODLION 894 BURLINGTON, NC 27215		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 56.83

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	10/26/2025	$ 56.83	FOOD FOR THE EVENT
				$	

5. Total only this Page	$ 208.83
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,581.27

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)**

Disbursements

Amendment

 ☒ 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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ 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)	b. Coordinated Committee Name	d. Comments
ALAMANCE BOARD OF ELECTIONS 1128 SOUTH MAIN STREET GRAHAM, NC 27253	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	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
RA26	Check	O	12/01/2025	$ 84.00	FILIING FEE
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CAROLINA BANNER &SIGN CO 3535 HILLSBOROUGH RD DURHAM, NC 27705	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 862.82

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	09/30/2025	$ 97.91	BUTTONS CAMPAING
RA26	Debit Card	O	10/01/2025	$ 97.91	SIGNS

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CAROLINA BANNER &SIGN CO 3535 HILLSBOROUGH RD DURHAM, NC 27705	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 862.82

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	12/23/2025	$ 667.00	CAMPAIGN BANNERS
				$	

5. Total only this Page	$ 946.82
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,581.27

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 Political Party Committees

Pg 1 of 1 | Amendment ☒ Yes ☐ No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)	2. ID Number
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
NCDP NC DEMOCRATS 220 HILLSBOROUGH ST RALEIGH, NC 27603	
	c. Election Sum to Date
	$ 500.00

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
RA26	In-Kind	VOTE BUILDER	09/18/2025	$ 500.00
				$
				$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1220 Pages *(This line must be on line 7 of Detailed Summary Page CRO-1100)*	$ 500.00

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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARGIE SMITH 609 CHESTNUT STREET BURLINGTON, NC 27217				$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Electric Funds Tran		09/21/2025	$ 40.00
☐	RA26	Cash		12/01/2025	$ 20.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JEFFERY SMYTHE 1025 VALLEYDALE BURLINGTON, NC 27215	CITY COUNCILMAN	CITY OF BURLINGTON		$ 1,000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Check		12/05/2025	$ 1,000.00
☐					$
☐					$

4. Total only this Page	$ 1,060.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,150.00

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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHERYL MCLVER 404 W MONTCASLTE DR GREENSBORO, NC 27406	MINSTER	SELF		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Electric Funds Tran		11/22/2025	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LINDA MOORE 610 DURHAM STREET BURLINGTON, NC 27215				$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Money Order		12/01/2025	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SCOTT NEELY 209 HERON RD GEORGETOWN, SC 29440	OWNER MULTI FAMILY	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Check		10/05/2025	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 1,100.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,150.00

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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ANNIE HAIRSTON 424 AVON AVE BURLINGTON, NC 27215	HAIR DRESSER	SELF		$ 80.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Electric Funds Tran		12/12/2025	$ 20.00
☐	RA26	Electric Funds Tran		12/13/2025	$ 20.00
☐	RA26	Electric Funds Tran		12/22/2025	$ 40.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHAEL JAMEYSON P.O BOX 154 GLENVILLE, NC 28736	PRESIDENT	MULTI-FAMILY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Check		10/07/2025	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SHANNON LONG 4145 DICKEY MILL RD MEBANE, NC 27302	PASTOR	PASTOR		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Electric Funds Tran		10/03/2025	$ 20.00
☐	RA26	Cash		12/01/2025	$ 40.00
☐					$

4. Total only this Page	$ 240.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,150.00

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
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROBERT BRADY 5914 A STONEY MOUNTAIN BURLINGTON, NC 27217	NOT EMPLOYED	NOT EMPLOYED		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Electric Funds Tran		12/09/2025	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ANTHONY BROADWAY 1016 GALVESTON CT HAW RIVER, NC 27255	BAIL BONDSMAN	BROADWAY BAIL BOND		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Electric Funds Tran		12/30/2025	$ 150.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROBERT BYRD 2826 CHARLOTTE LANE BURLINGTON, NC 27215	PROFESSOR	ELON		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	RA26	Electric Funds Tran		11/12/2025	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 750.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,150.00

Aggregated Contributions from Individuals

Page 2 of 2

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	RA26	Electric Funds Tran		12/12/2025	$ 25.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		12/13/2025	$ 25.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 25.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		09/25/2025	$ 25.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 25.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/08/2025	$ 50.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		10/29/2025	$ 20.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/09/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		10/31/2025	$ 50.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00

4. Total only this Page	$	$345.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$	$966.00

Aggregated Contributions from Individuals

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
CAMPAIGN TO ELECT RAMONA ALLEN	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	RA26	Debit Card		09/27/2025	$ 10.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/23/2025	$ 50.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		10/03/2025	$ 40.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/08/2025	$ 50.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		12/07/2025	$ 25.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/13/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/16/2025	$ 25.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/24/2025	$ 40.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/08/2025	$ 21.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/26/2025	$ 40.00
☐ Add ☐ Remove	RA26	Debit Card		10/16/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/22/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/13/2025	$ 20.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		12/20/2025	$ 20.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/16/2025	$ 50.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		12/13/2025	$ 10.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 20.00
☐ Add ☐ Remove	RA26	Cash		12/01/2025	$ 40.00
☐ Add ☐ Remove	RA26	Electric Funds Tran		11/22/2025	$ 20.00

4. Total only this Page	$	$621.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$	$966.00