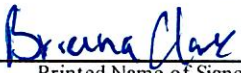
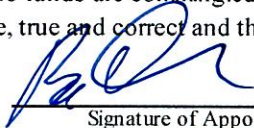


Disclosure Report Cover

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 OAK DRIVE BURLINGTON, NC 27215			07/10/2026	
			e. Phone Number	
			(336) 437-4832	
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)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign ☐ Party ☐ Joint Fundraiser ☐ PAC ☐ Referendum ☐ Legal Expense Fund		Municipal State/County Referendum ☐ Organizational ☐ Organizational ☐ Thirty-five day ☐ Quarterly ☐ Pre-primary ☐ First ☐ Pre-election ☐ Second ☐ Pre-runoff ☐ Third ☐ Semi-annual ☐ Fourth ☐ Mid Year ☐ Semi-annual ☐ Year End ☒ Mid Year ☐ Final ☐ Year End ☐ Special ☐ Final ☐ ☐ Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
☐ "Booster Fund" ☐ Building Fund ☐ Presidential Election Year Candidates Fund ☐ NC Public Campaign Financing Fund ☐ Other:				
8. Number of Fundraisers this Report				
0				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
WOODFOREST NATIONAL BANK				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CAMPAIGN RELATED ACTIVITY	RA26			
	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				
 Printed Name of Signer		 Signature of Appointed Treasurer		07/10/2026 Date
FOR OFFICE USE ONLY				
Date Received:	7/10/26	Employee:	Delivery Method ☐ Normal Mail ☐ Registered Mail ☒ Hand Delivered ☐ Electronically Filed	
Date Postmarked:		Employee:		
Date Scanned:	7/10/26	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	
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			\$ 0.00		\$ 0.00
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	
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)		\$ 4,616.00		\$ 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)		\$ 205.77		\$ 205.77	
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	

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment
☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable) CAMPAIGN TO ELECT RAMONA ALLEN					2. ID Number	
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	CAMPING PRINTS
☐ Add ☐ Remove	RA26	Debit Card	O	11/09/2025	\$ 29.89	FLYERS
☐ 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		
I - Postage		J - Penalties		H* - Holding Public Office Expenses		
O* - Other				K* - Office Expenses		
Q* - Donations to Legal Expense Fund						
* Codes require detailed explanation in required remarks field (g)						

Aggregated Contributions from IndividualsPage 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		02/21/2026	\$ 50.00	
☐ Add ☐ Remove	RA26	Electric Funds Tran		03/15/2026	\$ 50.00	
☐ Add ☐ Remove	RA26	Cash		03/15/2026	\$ 50.00	
☐ Add ☐ Remove	RA26	Electric Funds Tran		03/15/2026	\$ 50.00	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 1,256.00	

CRO-1205

NC State Board of Elections

April 2007

Amendment ☒ Yes ☐ No 1 of 14 Pg

1. Committee Full Name (and Fund if applicable)

	CAMPAIGN TO ELECT RAMONA ALLEN
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CRO-1210 NC State Board of Elections

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO-1205 is not used
 Pg 2 of 14
 Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable) CAMPAIGN TO ELECT RAMONA ALLEN										2. ID Number	
3. Contributor Information											
☐ Add ☐ Remove a. Full Name, Mailing Address & Phone FAIGER BLACKWELL 2234 LAKEVIEW TERRACE ELON, NC 27244 (include city, state, & zip) b. Job Title/Profession SELF EMPLOYED c. Employer's Name/Specific Field SELF EMPLOYER d. Comments e. Election Sum to Date \$ 400.00											
f. Prior ☐ g. Account Code RA26 h. Form of Payment Electric Funds Tran i. In-Kind Description j. Date (m/m/dd/yyyy) 03/02/2026 k. Amount \$ 400.00											
☐											
☐											
3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone ROBERT BRADY 5914 A STONEY MOUNTAIN BURLINGTON, NC 27217 (include city, state, & zip) b. Job Title/Profession NOT EMPLOYED c. Employer's Name/Specific Field NOT EMPLOYED d. Comments e. Election Sum to Date \$ 600.00											
f. Prior ☐ g. Account Code RA26 h. Form of Payment Debit Card i. In-Kind Description j. Date (m/m/dd/yyyy) 03/01/2026 k. Amount \$ 100.00											
☐											
☐											
3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone ROBERT BYRD 2826 CHARLOTTE LANE BURLINGTON, NC 27215 (include city, state, & zip) b. Job Title/Profession PROFESSOR c. Employer's Name/Specific Field ELON d. Comments e. Election Sum to Date \$ 300.00											
f. Prior ☐ g. Account Code RA26 h. Form of Payment Electric Funds Tran i. In-Kind Description j. Date (m/m/dd/yyyy) 02/17/2026 k. Amount \$ 200.00											
☐											
☐											
4. Total only this Page \$ 700.00											
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) \$ 7,951.26											

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used
 Pg 3 of 14
 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)		CAMPAGN TO ELECT RAMONA ALLEN	
2. ID Number			
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
DANA COURTNEY 2521 ROGERS GRAHAM, NC 27253	NOT EMPLOYED	NOT EMPLOYED	
e. Election Sum to Date	\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
	RA26	Debit Card	
j. Date (m/m/dd/yyyy)	k. Amount		
03/16/2026	\$ 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
HELEN CUNNINGHAM IRELAND ST BURLINGTON, NC 27217			
e. Election Sum to Date	\$ 140.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
	RA26	Cash	
j. Date (m/m/dd/yyyy)	k. Amount		
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
AMY DORRA 1326 METHYL ST PITTSBURGH, PA 15216	RETIRED	RETIRED	
e. Election Sum to Date	\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
	RA26	Debit Card	
j. Date (m/m/dd/yyyy)	k. Amount		
03/10/2026	\$ 150.00		
4. Total only this Page			
\$ 350.00			
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)			
\$ 7,951.26			

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used
 Pg 4 of 14
 Amendment ☒ Yes ☐ No

I. Committee Full Name (and Fund if applicable) CAMPAIGN TO ELECT RAMONA ALLEN		2. ID Number	
3. Contributor Information			
a. Full Name, Mailing Address & Phone JAMAL DORRA 1326 METHYL ST PITTSBURGH, PA 15216 (include city, state, & zip)		b. Job Title/Profession RETIRED	
c. Employer's Name/Specific Field RETIRED		d. Comments	
e. Election Sum to Date \$ 400.00		f. Prior \$ 400.00	
g. Account Code RA26		h. Form of Payment Cash	
i. In-Kind Description 03/02/2026		j. Date (m/m/dd/yyyy) \$ 400.00	
k. Amount \$ 400.00		l. Add ☐ Remove ☐	
3. Contributor Information			
a. Full Name, Mailing Address & Phone ANTHONY FORREST 2211 QUAIL DRIVE GRAHAM, NC 27253 (include city, state, & zip)		b. Job Title/Profession NOT EMPLOYED	
c. Employer's Name/Specific Field NOT EMPLOYED		d. Comments	
e. Election Sum to Date \$ 250.00		f. Prior \$ 250.00	
g. Account Code RA26		h. Form of Payment Check	
i. In-Kind Description 05/03/2026		j. Date (m/m/dd/yyyy) \$ 250.00	
k. Amount \$ 250.00		l. Add ☐ Remove ☐	
3. Contributor Information			
a. Full Name, Mailing Address & Phone LINETTE FOUST RENDALL STREET BURLINGTON, NC 27215 (include city, state, & zip)		b. Job Title/Profession CUSTOMER SERVICE	
c. Employer's Name/Specific Field SERVICE		d. Comments	
e. Election Sum to Date \$ 90.00		f. Prior \$ 90.00	
g. Account Code RA26		h. Form of Payment Electric Funds Tran	
i. In-Kind Description 11/26/2025		j. Date (m/m/dd/yyyy) \$ 40.00	
k. Amount \$ 40.00		l. Add ☒ Remove ☐	
a. Full Name, Mailing Address & Phone LINETTE FOUST RENDALL STREET BURLINGTON, NC 27215 (include city, state, & zip)		b. Job Title/Profession CUSTOMER SERVICE	
c. Employer's Name/Specific Field SERVICE		d. Comments	
e. Election Sum to Date \$ 90.00		f. Prior \$ 90.00	
g. Account Code RA26		h. Form of Payment Electric Funds Tran	
i. In-Kind Description 03/15/2026		j. Date (m/m/dd/yyyy) \$ 50.00	
k. Amount \$ 50.00		l. Add ☐ Remove ☐	
4. Total only this Page \$ 700.00			
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) \$ 7,951.26			

Contributions from Individuals

Pg 5 of 14

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		d. Comments	
CHERIE GARLAND PO BOX 11445 DNANVILLE, VA 24543				TEACHER			
				c. Employer's Name/Specific Field			
				VA			
				e. Election Sum to Date			
				\$		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		11/13/2025		\$ 20.00	
☐	RA26	Electric Funds Tran		02/22/2026		\$ 30.00	
☐	RA26	Electric Funds Tran		03/14/2026		\$ 100.00	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BRIAN GODFREY 3305 SMITH CROSSING DRIVE KERNERSVILLE, NC 27284				PEST CONTROL TECHNICIAN			
				c. Employer's Name/Specific Field			
				APTIVE PEST CONTROL			
				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	
☐	RA26	Debit Card		03/14/2026		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TAIWAN GODFREY 1118 EVELYNNVIEW KERNERSVILLE, NC 27284				CUSTOMER SERVICE			
				c. Employer's Name/Specific Field			
				SERVICES			
				e. Election Sum to Date			
				\$		154.79	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	RA26	Electric Funds Tran		03/13/2026		\$ 4.79	
☐	RA26	Debit Card		03/13/2026		\$ 150.00	
☐						\$	
4. Total only this Page						\$ 384.79	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,951.26	

Contributions from Individuals

Pg 6 of 14

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		d. Comments	
CHRISTINA GRAVES 656 AFFRIMED DR WHISETT, NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 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		02/26/2026		\$ 150.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KERI GRAVES 302 FOSTER ST BURLINGTON, NC 27217				MEMBER SERVICES AGENT			
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 70.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☒	RA26	Electric Funds Tran		12/20/2025		\$ 20.00	
☐	RA26	Electric Funds Tran		03/12/2026		\$ 50.00	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANNIE HAIRSTON 424 AVON AVE BURLINGTON, NC 27215				HAIR DRESSER			
				c. Employer's Name/Specific Field			
				SELF			
				e. Election Sum to Date			
						\$ 180.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	RA26	Debit Card		03/11/2026		\$ 100.00	
☐						\$	
☐						\$	
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)						\$ 7,951.26	

Contributions from Individuals

Pg 7 of 14

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		d. Comments	
ERNESTINA HOLMAN ROSS ST BURLINGTON, NC 27215				TEACHER			
				c. Employer's Name/Specific Field			
				TEACHER			
						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	
☐	RA26	Check		03/01/2026		\$ 200.00	
☐	RA26	Electric Funds Tran		03/15/2026		\$ 50.00	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HAROLD JAMES 404 UNION AVE BURLINGTON, NC 27215				SELF EMPOLYED			
				c. Employer's Name/Specific Field			
				SELF			
						e. Election Sum to Date	
						\$ 900.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	RA26	Check		02/28/2026		\$ 800.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANGIE KING 947 SOUTH HILL STREET MEBANE, NC 27302				OWNER DAY			
				c. Employer's Name/Specific Field			
						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	
☐	RA26	Check		03/06/2026		\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,951.26	

Contributions from Individuals

Pg 8 of 14

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		d. Comments
CATHY LAMB 3245 CASTLEROCK DR BURLINGTON, NC 27215				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$ 55.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Electric Funds Tran		03/14/2026	\$ 55.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ERNESTINE LEWIS 331 E MOREHEAD ST BURLINGTON, NC 27215				c. Employer's Name/Specific Field		
				RETIRED		
				e. Election Sum to Date		
				\$ 520.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Electric Funds Tran		03/12/2026	\$ 20.00	
☐	RA26	Electric Funds Tran		06/28/2026	\$ 60.00	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
SHANNON LONG 4145 DICKEY MILL RD MEBANE, NC 27302				c. Employer's Name/Specific Field		
				PASTOR		
				e. Election Sum to Date		
				\$ 460.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Debit Card		03/09/2026	\$ 400.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 535.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7,951.26	

Contributions from Individuals

Pg 9 of 14

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		d. Comments	
GLORETTA MCNEIL 2405 SUNDIAL CIR DURHAM, NC 27704				ASSISTANT MANGER			
				c. Employer's Name/Specific Field			
				CRESTVIEW			
						e. Election Sum to Date	
						\$ 70.00	
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		\$ 20.00	
☐	RA26	Electric Funds Tran		02/17/2026		\$ 50.00	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JENNIFER MILES 206 DRAKE LANE MEBANE, NC 27302				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						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	
☐	RA26	Electric Funds Tran		03/08/2026		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LINDA MOORE 610 DURHAM STREET BURLINGTON, NC 27215							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 1,300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	RA26	Cash		03/02/2026		\$ 550.00	
☐	RA26	Electric Funds Tran		03/26/2026		\$ 200.00	
☐						\$	
4. Total only this Page						\$ 900.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,951.26	

Contributions from Individuals

Pg 10 of 14

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		d. Comments	
KEITH NORWOOD NORWOOD 815 SARAH WILLIAMS GRAHAM, NC 27253				TRUCK DRIVER			
				c. Employer's Name/Specific Field			
				TRUCK DRIVER			
						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	
☐	RA26	Cash		03/02/2026		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BENSON PACKINGHAM 808 WASHINGTON STREET GRAHAM, NC 27253							
				c. Employer's Name/Specific Field			
						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	
☐	RA26	Credit Card		02/28/2026		\$ 200.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DEMOCRATIC WOMEN PARTY PO BOX 1815 BURLINGTON, NC 27216				DEMOCRATIC PARTY			
				c. Employer's Name/Specific Field			
						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	
☐	RA26	Check		03/24/2026		\$ 500.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 800.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,951.26	

Contributions from Individuals

Pg 11 of 14

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		d. Comments	
MONICA ROBINSON 2070 ROYCE DRIVE MEBANE, NC 27302							
						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		
☒	RA26	Electric Funds Tran		09/25/2025	\$ 25.00		
☒	RA26	Cash		12/01/2025	\$ 25.00		
☐	RA26	Electric Funds Tran		02/22/2026	\$ 100.00		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MONICA ROBINSON 2070 ROYCE DRIVE MEBANE, NC 27302							
						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		
☐	RA26	Electric Funds Tran		02/22/2026	\$ 100.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LEWIS RONE 4997 FARM VIEW DRIVE BURLINGTON, NC 27217							
						e. Election Sum to Date	
		\$ 51.80					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	RA26	Debit Card		03/11/2026	\$ 1.80		
☐	RA26	Debit Card		03/11/2026	\$ 50.00		
☐					\$		
4. Total only this Page						\$ 251.80	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,951.26	

Contributions from Individuals

Pg 12 of 14

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		d. Comments	
VERNELL RONE 4997 FARM VIEW DR BURLINGTON, NC 27217						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 153.60	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Electric Funds Tran		03/11/2026	\$ 3.60	
☐	RA26	Debit Card		03/11/2026	\$ 50.00	
☐	RA26	Electric Funds Tran		03/11/2026	\$ 50.00	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
VERNELL RONE 4997 FARM VIEW DR BURLINGTON, NC 27217						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 153.60	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Debit Card		03/11/2026	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
VERN SCHOFIELD 2719 WHITE OAK DR BURLINGTON, NC 27217						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 305.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Debit Card		02/26/2026	\$ 150.00	
☐	RA26	Debit Card		03/04/2026	\$ 155.00	
☐					\$	
4. Total only this Page					\$ 458.60	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7,951.26	

Contributions from Individuals

Pg 13 of 14

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		d. Comments	
LES TATE 808 RAY STREET BURLINGTON, NC 27217			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					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	
☐	RA26	Cash		03/02/2026	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SHARON TERRELL 2731 KICKWOOD DR APT 1E BUR;ONGTON, NC 27406			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Electric Funds Tran		03/08/2026	\$ 400.00	
☐	RA26	Electric Funds Tran		03/15/2026	\$ 50.00	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TANISHA TERRELL 7180 JOHNS POINT COURT LIBERTY, NC 27298						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 206.28	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	RA26	Debit Card		03/06/2026	\$ 6.28	
☐	RA26	Debit Card		03/06/2026	\$ 200.00	
☐					\$	
4. Total only this Page					\$ 856.28	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7,951.26	

Contributions from Individuals

Pg 14 of 14

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		d. Comments	
WANDA VANHOOK 803 ROSENWALD BURLINGTON, NC 27217			UNEMPLOYED			
			c. Employer's Name/Specific Field			
					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	
☐	RA26	Check		03/14/2026	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
THELMA WALTON 1327 N BEAUMONT CT, APT C BURLINGTON, NC 27217			CNA			
			c. Employer's Name/Specific Field			
			HOME CARE			
					e. Election Sum to Date	
					\$ 194.79	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☒	RA26	Debit Card		01/23/2026	\$ 40.00	
☐	RA26	Debit Card		02/22/2026	\$ 4.79	
☐	RA26	Credit Card		02/22/2026	\$ 150.00	
4. Total only this Page					\$ 254.79	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7,951.26	

CRO-1210

NC State Board of Elections

April 2007

Disbursements

Amendment

Pg 1 of 5 ☒ 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 <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) 5TH & WASHINGTON E WASHINGTON ST MEBANE, NC 27889				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:			
						e. Election Sum to Date	
		\$ 364.00					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RA26	Debit Card	O	03/13/2026	\$ 104.00	EVENT CENTER		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) AMAZON 410 TERRY AVE N SEATTLE, WA 98109				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:			
						e. Election Sum to Date	
		\$ 161.32					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RA26	Debit Card	O	03/09/2026	\$ 117.95	EVENT		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) BRIANA CLARK 4392 CANDENCE RIDGE CT GREENSBORO, NC 27406				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:			
						e. Election Sum to Date	
		\$ 2,000.00					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RA26	Check	O	05/08/2026	\$ 1,000.00	BOOK KEEPING		
RA26	Electric Funds Tran	O	06/04/2026	\$ 500.00	TREASER		
5. Total only this Page						\$ 1,721.95	
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>						\$ 7,418.29	
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
Pg 2 of 5 ☒ 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 <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) BRIANA CLARK 4392 CANDENCE RIDGE CT GREENSBORO, NC 27406				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 2,000.00	
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	06/20/2026	\$ 500.00	BOOK WORK		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) BRANDON GODFREY 1213 6TH LAS VEGAS, NV 89031				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 635.00	
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	03/15/2026	\$ 200.00	ARTIST		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) JONNY CARTER 212 6TH ST OAKLAND, CA 94607				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 3,125.00	
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	02/21/2026	\$ 500.00	EVENT		
RA26	Debit Card	O	03/13/2026	\$ 2,625.00	EVENT		
5. Total only this Page						\$ 3,825.00	
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>						\$ 7,418.29	
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
Pg 3 of 5 ☒ 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 <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 <i>(include city, state, & zip)</i> OFFICE DEPOT 1825 SOUTH CHURCH ST BURLINGTON, NC 27215				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 743.65	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RA26	Debit Card	O	03/11/2026	\$ 85.99	FLYERS		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> PEN.COM 1 SHARPE WAY BUILDING SHELBYVILLE, TN 37160				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 72.67	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RA26	Debit Card	O	03/11/2026	\$ 72.67	PENS		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> PUBLIX SUPER 2750 S CHURCH ST BURLINGTON, NC 27215				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 172.85	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RA26	Debit Card	O	04/23/2026	\$ 172.85	FOOD FOR EVENT		
				\$			
5. Total only this Page						\$ 331.51	
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>						\$ 7,418.29	
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

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

Pg 5 of 5 Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)

CAMPAIGN TO ELECT RAMONA ALLEN

2. ID Number

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

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

ZAZZLE
1800 SEAPORT BLVD
REDWOOD, NC 94063

☐ Add ☐ Remove

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

☐ Federal ☐ County:
☐ State ☐ Municipality:

e. Election Sum to Date

\$ 192.57

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RA26	Debit Card	O	04/06/2026	\$ 192.57	PRINTS
				\$	

5. Total only this Page

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)

\$ 192.57

\$ 7,418.29

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)

CRO-1310

NC State Board of Elections

December 2009

Aggregated Non-Media ExpendituresPage 1 of 1

Amendment

☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable) CAMPAIGN TO ELECT RAMONA ALLEN					2. ID Number	
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	04/07/2026	\$ 16.00	EVENT
☐ Add ☐ Remove	RA26	Debit Card	O	05/20/2026	\$ 27.37	EVENT
☐ Add ☐ Remove	RA26	Debit Card	O	02/16/2026	\$ 40.00	CAMPAIGN TSHIRT
☐ Add ☐ Remove	RA26	Debit Card	O	02/28/2026	\$ 43.22	FLYERS
☐ Add ☐ Remove	RA26	Debit Card	O	03/08/2026	\$ 26.58	ITEMS FOR EVENT
4. Total only this Page					\$ 153.17	
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$ 153.17	
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		
I - Postage		J - Penalties		H* - Holding Public Office Expenses		
O* - Other		K* - Office Expenses		Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009