

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 Campaign to Elect Ramona Allen			c. ID Number
b. Mailing Address (include City, State and Zip Code) 2711 White Oak Dr Burlington, NC			d. Date Filed
			e. Phone Number 919-491-9056
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	9/17/25	12/31/25	Natasha Woods
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	Municipal	State/County
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
8. Number of Fundraisers this Report		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name Woodforest National Bank		a. Financial Institution Full Name	
b. Purpose Campaign donations & expense	c. Account Code RA26	b. Purpose	c. Account Code
	d. Period Begin Balance \$	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="font-size: 2em; color: blue; margin: 0;">RECEIVED</p> <p style="color: red; font-weight: bold; margin: 5px 0;">MAR 31 2026</p> <p style="color: blue; font-weight: bold; margin: 0;">ALAMANCE COUNTY BOARD OF ELECTIONS</p> </div>	
			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.			
Natasha Woods Printed Name of Signer		 Signature of Appointed Treasurer	03-31-2026 Date
FOR OFFICE USE ONLY			
Date Received:	<u>3/31/26</u>	Employee:	<u>NA</u>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	<u>3/31/26</u>	Employee:	<u>NA</u>
Date Data Entered:	_____	Employee:	_____
Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training			
<p>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.</p> <p>You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.</p>			

Detailed Summary

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Committee to Elect Ramona Allen		Semi-Annual Year End			
Start of Election Cycle: January 1, 2025		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)	\$ 1464.00	\$ 1464.00		
6) Contributions from Individuals	(CRO-1210)	\$ 1250.00	\$ 1250.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$ 500.00	\$ 500.00		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$	\$		
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$		
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$ 1342.17	\$ 1342.17		
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$		
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 4556.17	\$ 4556.17		
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 3056.01	\$ 3056.01		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 115.57	\$ 115.57		
15) Loan Repayments	(CRO-1420)	\$	\$		
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$		
17) In-Kind Contributions	(CRO-1510)	\$ 500.00	\$ 500.00		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3671.58	\$ 3671.58		
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 884.59	\$ 884.59		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$			
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$			
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$			
24) Account Transfers Within the Committee	(CRO-1720)	\$			
25) Administrative Support	(CRO-1710)	\$	\$		
26) Forgiven Loans	(CRO-1440)	\$	\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	(CRO-1215)	\$	\$		

Aggregated Contributions from Individuals

Page

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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	
<input type="checkbox"/> Add	RA26	EFT		09/07/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		09/07/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		09/07/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		09/07/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		09/08/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/10/2025	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/10/2025	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/11/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/11/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/11/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/13/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/13/2025	\$ 40.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/15/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/21/2025	\$ 40.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		9/27/2025	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	Cash		10/17/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		10/25/2025	\$ 7.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	Cash		10/25/2025	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		10/25/2025	\$ 22.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		10/25/2025	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		10/27/2025	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RA26	EFT		10/29/2025	\$ 20.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 484.00	
5. Total of ALL CRO-1205 Pages					\$ 1464.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

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	
Campaign to Elect Ramona Allen						
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	
Bob Byrd 2826 Charlotte Ln Burlington NC 27215			Professor			
			c. Employer's Name/Specific Field			
			Elon University			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	RA26	Debit Card		11/12/2025		\$ 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	
Cheryl McIvor 404 W Montcastle Dr Greensboro, NC 27406			Minister			
			c. Employer's Name/Specific Field			
			Not employed			
					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"/>	RA26	Debit Card		11/22/2025		\$ 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	
Robery Brady 5914 A Stoney Moutain Rd Burlington, NC 27217			Police Officer			
			c. Employer's Name/Specific Field			
			Not employed			
					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"/>	RA26	Debit Card		12/9/2025		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 1100.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1250.00	

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	
Campaign to Elect Ramona Allen						
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	
Anthony Broadway 1016 Galveston Ct Haw River NC 27255			Bail Bondsman			
			c. Employer's Name/Specific Field Broadway Bail Bonds			
					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
<input type="checkbox"/>	RA26	Debit		12/30/2025		\$ 150.00
<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	
			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
<input type="checkbox"/>						\$
<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	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1250.00	

In-Kind Contributions

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 <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) NCDP - NC Democrats 220 Hillsborough St Raleigh, NC 27603		b. Type of Contributor	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 500.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
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	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
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	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
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)		\$	