

# Disclosure Report Cover

|           |                              |  |
|-----------|------------------------------|--|
| Amendment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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                            |   |
| Committee to Elect Betty Stocks for Concord City Council   |   |   |   |   |
| b. Mailing Address (include City, State and Zip Code)  |   |   | d. Date Filed                           |   |
| PO Box 883<br>Concord, NC 28026  |   |   |   |   |
|  |   |   | e. Phone Number                         |   |
|  |   |   |   |   |
| 2. Report Year   | 3. Period Start Date (mm/dd/yy)           | 4. Period End Date (mm/dd/yy)                                       | 5. Treasurer Full Name                  |   |
| 2021   | 01/01/2021                                | 09/21/2021  | Betty M Stocks                          |   |
| 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            | <b>Municipal</b>  | <b>State/County</b>                     | <b>Referendum</b>   |
| <input type="checkbox"/> PAC   | <input type="checkbox"/> Referendum       | <input type="checkbox"/> Organizational                             | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational                             |
| <input type="checkbox"/> Independent Expenditure   | <input type="checkbox"/> Joint Fundraiser | <input checked="" type="checkbox"/> Thirty-five day                 | Quarterly                               | <input type="checkbox"/> Pre-referendum                             |
| <input type="checkbox"/> Legal Expense Fund  |   | <input type="checkbox"/> Pre-primary                                | <input type="checkbox"/> First          | <input type="checkbox"/> Final                                      |
| 7. Type of Fund (if applicable, check one)   |   | <input type="checkbox"/> Pre-election                               | <input type="checkbox"/> Second         | <input type="checkbox"/> Supplemental Final                         |
| <input type="checkbox"/> "Booster Fund"  |   | <input type="checkbox"/> Pre-runoff                                 | <input type="checkbox"/> Third          | <input type="checkbox"/> Annual                                     |
| <input type="checkbox"/> Building Fund   |   | <input type="checkbox"/> Semi-annual                                | <input type="checkbox"/> Fourth         | <input type="checkbox"/> Special                                    |
| <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 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   |   |   |
| 0  |   |   |   |   |
| 11. Account Information  |   | 11. Account Information   |   |   |
| a. Financial Institution Full Name   |   | a. Financial Institution Full Name                                  |   |   |
| UWharrie Bank  |   |   |   |   |
| b. Purpose   | c. Account Code                           | b. Purpose  | c. Account Code                         |   |
| Donations  | 1   |   |   |   |
| Expenses   |   |   |   |   |
|  | d. Period Begin Balance                   |   | d. Period Begin Balance                 |   |
|  | \$ 0                                      |   | \$                                      |   |
| <b>CERTIFICATION</b>   |   |   |   |   |
| 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. |   |   |   |   |
| <u>Betty Stocks</u><br>Printed Name of Signer  |   | <u>Betty Stocks</u><br>Signature of Appointed Treasurer             |   | <u>9/28/2021</u><br>Date  |
| <b>FOR OFFICE USE ONLY</b>   |   |   |   |   |
| Date Received:   | <u>9-28-21</u>                            | Employee:   | <u>Trousseau</u>                        | <b>Delivery Method</b>  |
| Date Postmarked:   | _____                                     | Employee:   | _____                                   | <input type="checkbox"/> Normal Mail                                |
| Date Scanned:  | _____                                     | Employee:   | _____                                   | <input type="checkbox"/> Registered Mail                            |
| Date Data Entered:   | _____                                     | Employee:   | _____                                   | <input checked="" type="checkbox"/> Hand Delivered                  |
|  |   |   |   | <input type="checkbox"/> Electronically Filed                       |
|  |   |   |   | <input type="checkbox"/> Signer has not received mandatory training |
| <b>CABARRUS COUNTY BOARD OF ELECTIONS</b>  |   |   |   |   |
| <b>Please Note:</b> This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.   |   |   |   |   |
| SEP 28 2021  |   |   |   |   |
| 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                     |  |
|--|--|------------------------------------|------------|----------------------------------|--|
| Committee to Elect Betty Stocks for Concord City C                           |  | 35 day                             |            |                                  |  |
| <b>Start of Election Cycle:</b> <b>January 1,</b> <b>2021</b>                |  | <b>Total this Reporting Period</b> |            | <b>Total this Election Cycle</b> |  |
| 4) Cash on Hand at Start   |  | \$ 0                               |            | \$                               |  |
| <b>RECEIPTS</b>  |  |                                    |            |                                  |  |
| 5) Aggregated Contributions from Individuals                                 |  | (CRO-1205)                         | \$ 284.00  | \$                               |  |
| 6) Contributions from Individuals  |  | (CRO-1210)                         | \$ 2400.00 | \$                               |  |
| 7) Contributions from Political Party Committees                             |  | (CRO-1220)                         | \$ 0       | \$                               |  |
| 8) Contributions from Other Political Committees                             |  | (CRO-1230)                         | \$ 0       | \$                               |  |
| 9) Loan Proceeds   |  | (CRO-1410)                         | \$         | \$                               |  |
| 10) Refunds/Reimbursements To the Committee                                  |  | (CRO-1240)                         | \$ 0       | \$                               |  |
| 11) Other Receipt Sources  |  |                                    |            |                                  |  |
| 11a) Interest on Bank Accounts   |  | (CRO-1250)                         | \$ 0       | \$                               |  |
| 11b) Contributions from Not-for-Profit Organizations                         |  | (CRO-1250)                         | \$ 0       | \$                               |  |
| 11c) Outside Sources of Income   |  | (CRO-1250)                         | \$ 0       | \$                               |  |
| 11d) Legal Expense Fund – Other Sources                                      |  | (CRO-1270)                         | \$ 0       | \$                               |  |
| 11 e) Exempt Purchase Price Sales  |  | (CRO-1265)                         | \$ 0       | \$                               |  |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) |  |                                    | \$ 2684.00 | \$                               |  |
| <b>EXPENDITURES</b>  |  |                                    |            |                                  |  |
| 13) Disbursements  |  |                                    |            |                                  |  |
| 13a) Operating Expenditures  |  | (CRO-1310)                         | \$ 1775.96 | \$                               |  |
| 13b) Contributions to Candidates/Political Committees                        |  | (CRO-1310)                         | \$ 0       | \$                               |  |
| 13c) Coordinated Party Expenditures  |  | (CRO-1310)                         | \$ 0       | \$                               |  |
| 14) Aggregated Non-Media Expenditures  |  | (CRO-1315)                         | \$ 0       | \$                               |  |
| 15) Loan Repayments  |  | (CRO-1420)                         | \$ 0       | \$                               |  |
| 16) Refunds/Reimbursements From the Committee                                |  | (CRO-1320)                         | \$ 0       | \$                               |  |
| 17) In-Kind Contributions  |  | (CRO-1510)                         | \$ 656.06  | \$                               |  |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)          |  |                                    | \$ 2432.02 | \$                               |  |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) |  |                                    | \$ 251.98  | \$                               |  |
| <b>ADDITIONAL INFORMATION</b>  |  |                                    |            |                                  |  |
| 20) Non-Monetary Gifts Given to Other Committees                             |  | (CRO-1330)                         | \$ 0       |                                  |  |
| 21) Outstanding Loans (incl. ones from other campaigns)                      |  | (CRO-1430)                         | \$ 1000.00 |                                  |  |
| 22) Debts and Obligations owed By the Committee                              |  | (CRO-1610)                         | \$ 0       |                                  |  |
| 23) Debts and Obligations owed To the Committee                              |  | (CRO-1620)                         | \$ 0       |                                  |  |
| 24) Account Transfers Within the Committee                                   |  | (CRO-1720)                         | \$ 0       |                                  |  |
| 25) Administrative Support   |  | (CRO-1710)                         | \$ 0       | \$                               |  |
| 26) Forgiven Loans   |  | (CRO-1440)                         | \$ 0       | \$                               |  |
| 27) 48-Hour Notice Reports Sum   |  | (CRO-2220)                         | \$ 0       | \$                               |  |
| 28) Contributions to be Refunded   |  | (CRO-1215)                         | \$ 0       | \$                               |  |

# Aggregated Contributions from Individuals

Page

1 of 1

|                              |  |  |
|------------------------------|--|--|
| Amendment                    |  |  |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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         |           |
|--|--------|-----------------|--------------------|------------------------|----------------------|-----------|
| Committee to elect Betty Stocks for<br>Concord City Council            |        |                 |                    |                        |                      |           |
| 3. Contributor Information   |        |                 |                    |                        |                      |           |
| a. Amend   |        | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Check              |                        | 08/02/2021           | \$ 50.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Electronic         |                        | 08/24/2021           | \$ 50.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Electronic         |                        | 08/24/2021           | \$ 50.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Electronic         |                        | 08/29/2021           | \$ 49.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Electronic         |                        | 09/04/2021           | \$ 10.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Electronic         |                        | 09/17/2021           | \$ 25.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Electronic         |                        | 09/20/2021           | \$ 25.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/>                                    | Add    | 1               | Check              |                        | 08/24/2021           | \$ 25.00  |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      |           |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Add    |                 |                    |                        |                      | \$        |
| <input type="checkbox"/>   | Remove |                 |                    |                        |                      | \$        |
| <b>4. Total only this Page</b>   |        |                 |                    |                        | \$ 284.00            |           |
| <b>5. Total of ALL CRO-1205 Pages</b>                                  |        |                 |                    |                        | \$ 284.00            |           |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> |        |                 |                    |                        |                      |           |

# 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  |         |
|---|-----------------|--------------------|---|----------------------|---|---------|
| Committee to Elect Betty Stocks for Concord City Council  |                 |                    |   |                      |   |         |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove  |                 |                    |   |                      |   |         |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>William Gieger<br>7521 Sheffingdell Drive<br>Charlotte, NC 28226            |                 |                    | <b>b. Job Title/Profession</b><br>Retired<br>Consultant<br><br><b>c. Employer's Name/Specific Field</b><br>_____  |                      | <b>d. Comments</b><br><br><br><br><b>e. Election Sum to Date</b><br>\$ 175.00 |         |
| f. Prior  | g. Account Code | h. Form of Payment | i. In-Kind Description  | j. Date (mm/dd/yyyy) | k. Amount   |         |
| <input type="checkbox"/>  | 1               | Electronic         |   | 08/22/2021           | \$  | 100.00  |
| <input type="checkbox"/>  | 1               | Check              |   |                      | \$  |         |
| <input type="checkbox"/>  |                 |                    |   |                      | \$  |         |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                 |                    |   |                      |   |         |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Donald Anthony<br>37 Tribune Street<br>Concord<br>NC<br>28025               |                 |                    | <b>b. Job Title/Profession</b><br>Clergy<br><br><b>c. Employer's Name/Specific Field</b><br>Grace Lutheran Church |                      | <b>d. Comments</b><br><br><br><br><b>e. Election Sum to Date</b><br>\$ 200.00 |         |
| f. Prior  | g. Account Code | h. Form of Payment | i. In-Kind Description  | j. Date (mm/dd/yyyy) | k. Amount   |         |
| <input type="checkbox"/>  | 1               | Electronic         |   | 08/26/2021           | \$  | 200.00  |
| <input type="checkbox"/>  |                 |                    |   |                      | \$  |         |
| <input type="checkbox"/>  |                 |                    |   |                      | \$  |         |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                 |                    |   |                      |   |         |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Diamond Staton-Williams<br>6626 Burkwood Court<br>Harrisburg<br>NC<br>28075 |                 |                    | <b>b. Job Title/Profession</b><br>Nurse<br><br><b>c. Employer's Name/Specific Field</b><br>Atrium Health          |                      | <b>d. Comments</b><br><br><br><br><b>e. Election Sum to Date</b><br>\$ 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"/>  | 1               | Electronic         |   | 09/08/2021           | \$  | 100.00  |
| <input type="checkbox"/>  |                 |                    |   |                      | \$  |         |
| <input type="checkbox"/>  |                 |                    |   |                      | \$  |         |
| 4. Total only this Page   |                 |                    |   |                      | \$  | 575.00  |
| 5. Total of ALL CRO-1210 Pages  |                 |                    |   |                      | \$  | 2400.00 |
| (This line must be on line 6 of Detailed Summary Page CRO-1100)   |                 |                    |   |                      |   |         |

# Contributions from Individuals

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

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

|   |                        |                           |  |                             |                                |                  |
|---|------------------------|---------------------------|--|-----------------------------|--------------------------------|------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |                        |                           |  |                             | <b>2. ID Number</b>            |                  |
| Committee to Elect Betty Stocks for Concord City Council  |                        |                           |  |                             |                                |                  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |  |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| Walter Stofferd<br>125 Cottontail Lane<br>Concord<br>NC<br>28025  |                        |                           | Retired<br>Law Enforcement               |                             |                                |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |                  |
|   |                        |                           |  |                             | \$ 200.00                      |                  |
| <b>f. Prior</b>   | <b>g. Account Code</b> | <b>h. Form of Payment</b> | <b>i. In-Kind Description</b>            | <b>j. Date (mm/dd/yyyy)</b> |                                | <b>k. Amount</b> |
| <input type="checkbox"/>  | 1                      | Check                     |  | 08/26/2021                  |                                | \$ 200.00        |
| <input type="checkbox"/>  |                        |                           |  |                             |                                | \$               |
| <input type="checkbox"/>  |                        |                           |  |                             |                                | \$               |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove            |                        |                           |  |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| Thomas Anderson Langford<br>801 Rothmoor Drive<br>Concord<br>NC<br>28025                                  |                        |                           | Retired<br>Clergy                        |                             |                                |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |                  |
|   |                        |                           |  |                             | \$ 200.00                      |                  |
| <b>f. Prior</b>   | <b>g. Account Code</b> | <b>h. Form of Payment</b> | <b>i. In-Kind Description</b>            | <b>j. Date (mm/dd/yyyy)</b> |                                | <b>k. Amount</b> |
| <input type="checkbox"/>  | 1                      | Check                     |  | 08/28/2021                  |                                | \$ 200.00        |
| <input type="checkbox"/>  |                        |                           |  |                             |                                | \$               |
| <input type="checkbox"/>  |                        |                           |  |                             |                                | \$               |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove            |                        |                           |  |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| Jean Caldwell<br>723 Central Drive<br>Concord<br>NC<br>28025  |                        |                           | Retired<br>Executive Admin. Assit.       |                             |                                |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |                  |
|   |                        |                           |  |                             | \$ 250.00                      |                  |
| <b>f. Prior</b>   | <b>g. Account Code</b> | <b>h. Form of Payment</b> | <b>i. In-Kind Description</b>            | <b>j. Date (mm/dd/yyyy)</b> |                                | <b>k. Amount</b> |
| <input type="checkbox"/>  | 1                      | Electronic                |  | 09/04/2021                  |                                | \$ 250.00        |
| <input type="checkbox"/>  |                        |                           |  |                             |                                | \$               |
| <input type="checkbox"/>  |                        |                           |  |                             |                                | \$               |
| <b>4. Total only this Page</b>  |                        |                           |  |                             | \$ 650.00                      |                  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)  |                        |                           |  |                             | \$ 2400.00                     |                  |



# 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            |  |
|--|-----------------|--------------------|-----------------------------------|----------------------|-------------------------|--|
| Committee to Elect Betty Stocks for Concord City Council   |                 |                    |                                   |                      |                         |  |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                 |                    |                                   |                      |                         |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                                    |                 |                    | b. Job Title/Profession           |                      | d. Comments             |  |
| Alfred Brown, Jr.<br>100 Grove Avenue<br>Concord, NC 28025   |                 |                    | Retired<br>Communications         |                      |                         |  |
|  |                 |                    | 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               |  |
| <input type="checkbox"/>   | 1               | Check              |                                   | 09/10/2021           | \$ 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<br>(include city, state, & zip)                                    |                 |                    | b. Job Title/Profession           |                      | d. Comments             |  |
| Amos McClorey<br>1310 Cooper Avenue<br>Kannapolis<br>NC<br>28083   |                 |                    | Retired<br>Manufacturing          |                      |                         |  |
|  |                 |                    | c. Employer's Name/Specific Field |                      |                         |  |
|  |                 |                    |                                   |                      | e. Election Sum to Date |  |
|  |                 |                    |                                   | \$ 375.00            |                         |  |
| f. Prior   | g. Account Code | h. Form of Payment | i. In-Kind Description            | j. Date (mm/dd/yyyy) | k. Amount               |  |
| <input type="checkbox"/>   | 1               | Money Orde         |                                   | 09/13/2021           | \$ 375.00               |  |
| <input type="checkbox"/>   |                 |                    |                                   |                      | \$                      |  |
| <input type="checkbox"/>   |                 |                    |                                   |                      | \$                      |  |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                 |                    |                                   |                      |                         |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                                    |                 |                    | b. Job Title/Profession           |                      | d. Comments             |  |
| Scott Padgett<br>693 Union Street S.<br>Concord<br>NC<br>28025   |                 |                    | Retired<br>Educator               |                      |                         |  |
|  |                 |                    | 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"/>   | 1               | Check              |                                   | 08/30/2021           | \$ 500.00               |  |
| <input type="checkbox"/>   |                 |                    |                                   |                      | \$                      |  |
| <input type="checkbox"/>   |                 |                    |                                   |                      | \$                      |  |
| 4. Total only this Page  |                 |                    |                                   |                      | \$ 975.00               |  |
| 5. Total of ALL CRO-1210 Pages<br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> |                 |                    |                                   |                      | \$ 2400.00              |  |

# Contributions from Individuals

|                          |     |                          |
|--------------------------|-----|--------------------------|
| Amendment                |     |                          |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> |
| <input type="checkbox"/> | 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            |  |
|--|-----------------|--------------------|-----------------------------------|----------------------|-------------------------|--|
| Committee to Elect Betty Stocks for Concord City Council   |                 |                    |                                   |                      |                         |  |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                                   |                      |                         |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |                 |                    | b. Job Title/Profession           |                      | d. Comments             |  |
| Marcus Singleton<br>76 Bridlewood Place<br>Concord<br>NC<br>28025                                  |                 |                    | Retired                           |                      |                         |  |
|  |                 |                    | Military                          |                      |                         |  |
|  |                 |                    | 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               |  |
| <input type="checkbox"/>   | 1               | Electronic         |                                   | 08/26/2021           | \$ 100.00               |  |
| <input type="checkbox"/>   |                 |                    |                                   |                      | \$                      |  |
| <input type="checkbox"/>   |                 |                    |                                   |                      | \$                      |  |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                                   |                      |                         |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |                 |                    | b. Job Title/Profession           |                      | d. Comments             |  |
| Wendy Wood<br>717 Union Street S<br>Concord<br>NC<br>28025   |                 |                    | Retired                           |                      |                         |  |
|  |                 |                    | Educator                          |                      |                         |  |
|  |                 |                    | 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               |  |
| <input type="checkbox"/>   | 1               | Electronic         |                                   | 09/16/2021           | \$ 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<br>(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  |                 |                    |                                   |                      | \$ 200.00               |  |
| 5. Total of ALL CRO-1210 Pages   |                 |                    |                                   |                      | \$ 2400.00              |  |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>                             |                 |                    |                                   |                      |                         |  |

# Disbursements

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

|   |                           |  |  |   |                            |
|---|---------------------------|--|--|---|----------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |                           |  |  |   | <b>2. ID Number</b>        |
| Committee to Elect Betty Stock for Concord City Co  |                           |  |  |   |                            |
| <b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>     |                           |  |  |   |                            |
| <input checked="" type="checkbox"/> Operating Expenses  |                           | <input type="checkbox"/> Contributions to Candidates/Political Committees  |  | <input type="checkbox"/> Coordinated Party Expenditures |                            |
| <b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove           |                           |  |  |   |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>                   |                           | <b>b. Coordinated Committee Name</b>   |  | <b>d. Comments</b>                                      |                            |
| Vista Print<br>95 Hayden Avenue<br>Lexington, MA 02421  |                           |  |  |   |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |  | <b>e. Election Sum to Date</b>                          |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |  | \$ 368.01   |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b>                | <b>j. Amount</b>  | <b>k. Required Remarks</b> |
| 1   | Bank Card                 | B  | 08/24/2021                                 | \$156.53  | Business Cards             |
| 1   | Bank Card                 | B  | 08/29/2021                                 | \$52.00   | Postcard Magnets           |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                      |                           |  |  |   |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>                   |                           | <b>b. Coordinated Committee Name</b>   |  | <b>d. Comments</b>                                      |                            |
| Vista Print<br>95 Hayden Avenue<br>Lexington, MA 02421  |                           |  |  |   |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |  | <b>e. Election Sum to Date</b>                          |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |  | \$ 368.01   |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b>                | <b>j. Amount</b>  | <b>k. Required Remarks</b> |
| 1   | Bank Card                 | B  | 08/23/2021                                 | \$159.48  | Door Hangers               |
|   |                           |  |  | \$  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                      |                           |  |  |   |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>                   |                           | <b>b. Coordinated Committee Name</b>   |  | <b>d. Comments</b>                                      |                            |
| Staples<br>1480 Concord Parkway N<br>Concord, NC 28025  |                           |  |  |   |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |  | <b>e. Election Sum to Date</b>                          |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |  | \$ 121.41   |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b>                | <b>j. Amount</b>  | <b>k. Required Remarks</b> |
| 1   | Bank Card                 | B  | 09/10/2021                                 | \$107.83  | Post Cards                 |
| 1   | Bank Card                 | O  | 09/10/2021                                 | \$13.58   | Card Holders               |
| <b>5. Total only this Page</b>  |                           |  |  |   | \$ 489.42                  |
| <b>6. Total of ALL CRO-1310 Pages</b>   |                           |  |  |   | \$ 1775.96                 |
| <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>       |                           |  |  |   |                            |
| <b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>                                 |                           |  |  |   |                            |
| <b>A* - Media</b>   | <b>B* - Printing</b>      | <b>C* - Fundraising</b>  | <b>D - To Another Candidate</b>            |   |                            |
| <b>E - Salaries</b>   | <b>F* - Equipment</b>     | <b>G - Political Party</b>   | <b>H* - Holding Public Office Expenses</b> |   |                            |
| <b>I - Postage</b>  | <b>J - Penalties</b>      | <b>K* - Office Expenses</b>  | <b>Q* - Donation to Legal Expense Fund</b> |   |                            |
| <b>O* - Other</b>   |                           |  |  |   |                            |
| <b>* Codes require detailed explanation in required remarks field (k)</b>                                     |                           |  |  |   |                            |



# Disbursements

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

|  |                           |  |                             |                                     |                            |
|--|---------------------------|--|-----------------------------|-------------------------------------|----------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                           |  |                             |                                     | <b>2. ID Number</b>        |
| Committee to Elect Betty Stocks for Concord City C   |                           |  |                             |                                     |                            |
| <b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>  |                           |  |                             |                                     |                            |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures   |                           |  |                             |                                     |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Rebel Idealist LLC<br>5 3 <sup>rd</sup> S. Suite 900<br>San Fransico, CA 94103   |                           |  |                             |                                     |                            |
|  |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|  |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             |                                     |                            |
|  |                           |  |                             | \$ 8.38                             |                            |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1  | Bank Card                 | O  | 09/03/2021                  | \$8.38                              | Donorbox Fees              |
|  |                           |  |                             | \$                                  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Best Name Badges<br>1700 NW 65 <sup>th</sup> Avenue St. 4<br>Plantation, FL 33313  |                           |  |                             |                                     |                            |
|  |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|  |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             |                                     |                            |
|  |                           |  |                             | \$ 35.40                            |                            |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1  | Bank Card                 | B  | 08/25/2021                  | \$35.40                             | Name Badge                 |
|  |                           |  |                             | \$                                  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| ASAP Graphics<br>8112 Statesville Road St. F<br>Charlotte. NC 28269  |                           |  |                             |                                     |                            |
|  |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|  |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             |                                     |                            |
|  |                           |  |                             | \$ 759.33                           |                            |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1  | Bank Card                 | B  | 08/31/2021                  | \$759.33                            | Yards Signs<br>Stakes      |
|  |                           |  |                             | \$                                  |                            |
| <b>5. Total only this Page</b>   |                           |  |                             |                                     | \$ 803.11                  |
| <b>6. Total of ALL CRO-1310 Pages</b><br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |  |                             |                                     | \$ 1775.96                 |
| <b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)   |                           |  |                             |                                     |                            |
| A* - Media   |                           | B* - Printing  |                             | C* - Fundraising                    |                            |
| E - Salaries   |                           | F* - Equipment   |                             | G - Political Party                 |                            |
| I - Postage  |                           | J - Penalties  |                             | K* - Office Expenses                |                            |
| O* - Other   |                           |  |                             | D - To Another Candidate            |                            |
|  |                           |  |                             | H* - Holding Public Office Expenses |                            |
|  |                           |  |                             | Q* - Donation to Legal Expense Fund |                            |
| * 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.

|  |                           |                        |  |                                     |                                |
|--|---------------------------|------------------------|--|-------------------------------------|--------------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                           |                        |  |                                     | <b>2. ID Number</b>            |
| Committee to Elect Betty Stocks for Concord City C   |                           |                        |  |                                     |                                |
| <b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>  |                           |                        |  |                                     |                                |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures   |                           |                        |  |                                     |                                |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |                        |  |                                     |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>  |                           |                        | <b>b. Coordinated Committee Name</b>   |                                     | <b>d. Comments</b>             |
| DaVintee Screen Printing<br>82 Spring Street<br>Concord, NC 28025  |                           |                        |  |                                     |                                |
|  |                           |                        | <b>c. Level Registered (Specify)</b>   |                                     |                                |
|  |                           |                        | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                                     | <b>e. Election Sum to Date</b> |
|  |                           |                        |  |                                     | \$ 346.68                      |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b> | <b>i. Date (mm/dd/yyyy)</b>  | <b>j. Amount</b>                    | <b>k. Required Remarks</b>     |
| 1  | Bank Card                 | B                      | 09/10/2021   | \$346.68                            | T-Shirts                       |
|  |                           |                        |  | \$                                  |                                |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |                        |  |                                     |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>  |                           |                        | <b>b. Coordinated Committee Name</b>   |                                     | <b>d. Comments</b>             |
| Pay Pal<br>2211 N 1 <sup>st</sup> Street<br>san Jose, CA 95131   |                           |                        |  |                                     |                                |
|  |                           |                        | <b>c. Level Registered (Specify)</b>   |                                     |                                |
|  |                           |                        | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                                     | <b>e. Election Sum to Date</b> |
|  |                           |                        |  |                                     | \$ 31.65                       |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b> | <b>i. Date (mm/dd/yyyy)</b>  | <b>j. Amount</b>                    | <b>k. Required Remarks</b>     |
| 1  | Bank Draft                | O                      | 08/16/2021   | \$31.65                             | Fees                           |
|  |                           |                        |  | \$                                  |                                |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |                        |  |                                     |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>  |                           |                        | <b>b. Coordinated Committee Name</b>   |                                     | <b>d. Comments</b>             |
| Concord Parks & Rec<br>147 Academy Avenue<br>Concord, NC 28025   |                           |                        |  |                                     |                                |
|  |                           |                        | <b>c. Level Registered (Specify)</b>   |                                     |                                |
|  |                           |                        | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                                     | <b>e. Election Sum to Date</b> |
|  |                           |                        |  |                                     | \$ 60.00                       |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b> | <b>i. Date (mm/dd/yyyy)</b>  | <b>j. Amount</b>                    | <b>k. Required Remarks</b>     |
| 1  | Bank Card                 | C                      | 09/02/2021   | \$60.00                             | Facility Rental                |
|  |                           |                        |  | \$                                  |                                |
| <b>5. Total only this Page</b>   |                           |                        |  |                                     | \$ 438.33                      |
| <b>6. Total of ALL CRO-1310 Pages</b><br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |                        |  |                                     | \$ 1775.96                     |
| <b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>  |                           |                        |  |                                     |                                |
| A* - Media   |                           | B* - Printing          |  | C* - Fundraising                    |                                |
| E - Salaries   |                           | F* - Equipment         |  | G - Political Party                 |                                |
| I - Postage  |                           | J - Penalties          |  | K* - Office Expenses                |                                |
| O* - Other   |                           |                        |  | D - To Another Candidate            |                                |
|  |                           |                        |  | H* - Holding Public Office Expenses |                                |
|  |                           |                        |  | Q* - Donation to Legal Expense Fund |                                |
| * Codes require detailed explanation in required remarks field (k)   |                           |                        |  |                                     |                                |

# In-Kind Contributions

Pg \_\_\_\_ of \_\_\_\_

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

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

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

|   |  |  |                                |
|---|--|--|--------------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |  | <b>2. ID Number</b>  |                                |
| Committee to Elect Betty Stocks for<br>Concord City Council   |  |  |                                |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Betty Stocks<br>PO Box 883<br>Concord<br>NC<br>28026<br>7049185424  |  | <input type="checkbox"/> Individual<br><input checked="" type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|   |  |  | <b>d. Election Sum to Date</b> |
|   |  |  | \$ 602.53                      |
| <b>e. Description</b>   |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Filing Fee  |  | 07/26/2021   | \$ 102.00                      |
| Website   |  | 07/27/2021   | \$ 162.00                      |
|   |  |  | \$                             |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Betty Stocks<br>PO Box 883<br>Concord, NC 28026   |  | <input type="checkbox"/> Individual<br><input checked="" type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|   |  |  | <b>d. Election Sum to Date</b> |
|   |  |  | \$ 602.53                      |
| <b>e. Description</b>   |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Mailing Envelopes<br>Mailing Labels   |  | 08/26/2021   | \$ 277.30                      |
| Index Cards, Name Labels, Sharpies, Card Holder   |  | 09/06/2021   | \$ 46.96                       |
| Postcard Paper  |  | 09/19/2021   | \$ 14.27                       |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Betty Stocks<br>PO Box 883<br>Concord, NC<br>28026  |  | <input type="checkbox"/> Individual<br><input checked="" type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|   |  |  | <b>d. Election Sum to Date</b> |
|   |  |  | \$                             |
| <b>e. Description</b>   |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Printed Mailing Labels - BOE  |  | 09/20/2021   | \$ 20.60                       |
| Thank You Cards   |  | 09/11/2021   | \$ 32.95                       |
|   |  |  | \$                             |
| <b>4. Total only this Page</b>  |  |  | \$ 656.06                      |
| <b>5. Total of ALL CRO-1510 Pages</b><br>(This line must be on line 17 of Detailed Summary Page CRO-1100) |  |  | \$ 656.06                      |

# Loan Proceeds

Pg \_\_\_\_\_ of \_\_\_\_\_

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

Use this form to report proceeds from a loan and loan endorser's information  
 A loan proceeds statement must accompany each loan that is from an individual

|  |                            |  |                           |  |  |
|--|----------------------------|--|---------------------------|--|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                            |  |                           | <b>2. ID Number</b>                      |  |
| Committee to Elect Betty Stocks for<br>Concord City Council  |                            |  |                           |  |  |
| <b>3. Lender Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                            |  |                           |  |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                     |                            | <b>b. Job Title/Profession</b>           |                           | <b>d. Comments</b>                       |  |
| Betty M. Stocks<br>PO Box 883<br>Concord<br>NC<br>28026  |                            | Retired<br>Police Officer                |                           |  |  |
|  |                            | <b>c. Employer's Name/Specific Field</b> |                           | <b>e. Start Date (mm/dd/yyyy)</b>        |  |
|  |                            | City of Concord                          |                           | 07/27/2021                               |  |
|  |                            |  |                           | <b>f. End Date (mm/dd/yyyy)</b>          |  |
|  |                            |  |                           |  |  |
| <b>g. Rate</b>   | <b>h. Security Pledged</b> | <b>i. Account Code</b>                   | <b>j. Form of Payment</b> | <b>k. Amount</b>                         |  |
| 0 %  |                            | 1  | Check                     | \$ 1000.00                               |  |
| <b>l. Full Name of Lending Institution</b>   |                            |  |                           | <b>m. Loan Number</b>                    |  |
|  |                            |  |                           |  |  |
| <b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>                               |                            |  |                           |  |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                     |                            | <b>b. Job Title/Profession</b>           |                           | <b>c. Employer's Name/Specific Field</b> |  |
|  |                            |  |                           |  |  |
|  |                            | <b>d. Percentage</b>                     |                           | <b>e. Amount</b>                         |  |
|  |                            |  |                           | %  |  |
|  |                            |  |                           | \$                                       |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                     |                            | <b>b. Job Title/Profession</b>           |                           | <b>c. Employer's Name/Specific Field</b> |  |
|  |                            |  |                           |  |  |
|  |                            | <b>d. Percentage</b>                     |                           | <b>e. Amount</b>                         |  |
|  |                            |  |                           | %  |  |
|  |                            |  |                           | \$                                       |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                     |                            | <b>b. Job Title/Profession</b>           |                           | <b>c. Employer's Name/Specific Field</b> |  |
|  |                            |  |                           |  |  |
|  |                            | <b>d. Percentage</b>                     |                           | <b>e. Amount</b>                         |  |
|  |                            |  |                           | %  |  |
|  |                            |  |                           | \$                                       |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                     |                            | <b>b. Job Title/Profession</b>           |                           | <b>c. Employer's Name/Specific Field</b> |  |
|  |                            |  |                           |  |  |
|  |                            | <b>d. Percentage</b>                     |                           | <b>e. Amount</b>                         |  |
|  |                            |  |                           | %  |  |
|  |                            |  |                           | \$                                       |  |
| <b>5. Total of ALL CRO-1410 Pages</b>  |                            |  |                           | \$ 1000.00                               |  |
| <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>                               |                            |  |                           |  |  |