

Disclosure Report Cover

Amendment

☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

1. Committee Information				
a. Full Name			c. ID Number	
FRIENDS OF JUSTIN LEWTER				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
P O BOX 1002 KANNAPOLIS, NC 28082			10/26/2025	
			e. Phone Number	
			(704) 491-3649	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2025	09/24/2025	10/20/2025	DANIEL SQUIREWELL	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign ☐ Party ☐ Joint Fundraiser ☐ PAC ☐ Referendum ☐ Legal Expense Fund		Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☒ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special		
7. Type of Fund (if applicable, check one)		State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special		
☐ "Booster Fund" ☐ Building Fund ☐ Presidential Election Year Candidates Fund ☐ NC Public Campaign Financing Fund ☐ Other:		Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special		
8. Number of Fundraisers this Report		10. Special Report Name		
2				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
TRUIST BANK				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CAMPAIGN FINANCES	J4K			
	d. Period Begin Balance		d. Period Begin Balance	
	\$		\$	
CERTIFICATION				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board				
<u>Daniel Squirewell</u> Printed Name of Signer		<u>Daniel Squirewell</u> Signature of Appointed Treasurer		<u>10/26/2025</u> Date
FOR OFFICE USE ONLY				
Date Received:	<u>10/27/2025</u>	Employee:	<u>[Signature]</u>	Delivery Method
Date Postmarked:		Employee:		☐ Normal Mail
Date Scanned:	<u>10/28/25</u>	Employee:	<u>WAN</u>	☐ Registered Mail
Date Data Entered:		Employee:		☒ Hand Delivered
				☐ Electronically Filed
				☐ Signer has not received mandatory training
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.				

Detailed Summary

Amendment	
☐ Yes	☒ No

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
FRIENDS OF JUSTIN LEWTER		2025 Pre-Election			
Start of Election Cycle: January 1, 2025		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 12,980.19		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 175.00		\$ 675.00	
6) Contributions from Individuals (CRO-1210)		\$ 2,775.00		\$ 20,190.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 2,950.00		\$ 20,865.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 5,289.30		\$ 10,174.56	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 33.17		\$ 82.72	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 5,322.47		\$ 10,257.28	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 10,607.72		\$ 10,607.72	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 253.17	

Aggregated Contributions from IndividualsPage 1 of 1

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	
FRIENDS OF JUSTIN LEWTER						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
☐ Add ☐ Remove	J4K	Electric Funds Tran		09/29/2025	\$ 50.00	
☐ Add ☐ Remove	J4K	Electric Funds Tran		09/27/2025	\$ 25.00	
☐ Add ☐ Remove	J4K	Debit Card		10/19/2025	\$ 25.00	
☐ Add ☐ Remove	J4K	Credit Card		10/13/2025	\$ 50.00	
☐ Add ☐ Remove	J4K	Credit Card		10/08/2025	\$ 25.00	
4. Total only this Page					\$ \$175.00	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ \$175.00	

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals

Pg 1 of 5

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	
FRIENDS OF JUSTIN LEWTER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
PAM FRAZIER 5149 BEULAH LANE KERNERSVILLE, NC 27284				EDUCATOR		
				c. Employer's Name/Specific Field WSSU		
				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	
☐	J4K	Debit Card		10/18/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
HAROLD JOLLEY 15 ALTON AVE VOORHEES, NJ 08043				PASTOR		
				c. Employer's Name/Specific Field SECOND MACEDONIA BAPTIST CHURCH		
				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	
☐	J4K	Electric Funds Tran		09/25/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
HENRY LANCASTER 2208 MYRON DR RALEIGH, NC 27607				VP OF EXTERNAL AFFAIRS		
				c. Employer's Name/Specific Field LIBERTY ATLANTIC		
				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	
☐	J4K	Credit Card		09/27/2025	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,775.00	

Contributions from Individuals

Pg 2 of 5

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	
FRIENDS OF JUSTIN LEWTER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ANN LORAINE 106 EDGEWOOD CIRLE NE CONCORD, NC 28025				PROFESSOR		
				c. Employer's Name/Specific Field UNC CHARLOTTE		
				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	
☐	J4K	Credit Card		10/09/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
SCOTT MCCOY 207 WOOD AVE KANNAPOLIS, NC 28083				LOWE'S HOME IMPROVEMENT		
				c. Employer's Name/Specific Field ASSISTANT MANAGER		
				e. Election Sum to Date		
				\$ 75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	J4K	Electric Funds Tran		09/29/2025	\$ 75.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
DUVALE MURCHISON 6844 OLMSFORD DRIVE HUNTERSVILLE, NC 28078				RETIRED		
				c. Employer's Name/Specific Field SHERIFF'S OFFICE		
				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	
☐	J4K	Electric Funds Tran		09/29/2025	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 275.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,775.00	

Contributions from Individuals

Pg 3 of 5

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	
FRIENDS OF JUSTIN LEWTER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
GERI NORRIS-SIMMONS 4410 CRYSTAL LAKE DR. GREENSBORO, NC 27410				INSURANCE BROKER		
				c. Employer's Name/Specific Field SELF-EMPLOYED		
				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	
☐	J4K	Debit Card		10/15/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
MICHAEL PIERCE 1195 JANROSE CT NW CONCORD, NC 28027				CLINICAL SITE MANAGEMENT		
				c. Employer's Name/Specific Field ABBVIE		
				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	
☐	J4K	Electric Funds Tran		10/09/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ROBERT RICHARDSON 2663 STONEWOOD VIEW KANNAPOLIS, NC 28081				CASHIER		
				c. Employer's Name/Specific Field ROWAN ABC BOARD		
				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	
☐	J4K	Debit Card		10/15/2025	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,775.00	

Contributions from Individuals

Pg 4 of 5

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	
FRIENDS OF JUSTIN LEWTER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
OSEI RUBIE 54 ARIZONA AVE LONG BEACH, NY 11561				TITLE INSURANCE		
				c. Employer's Name/Specific Field NATION STANDARD ABSTRACT		
				e. Election Sum to Date		
				\$ 2,700.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	J4K	Credit Card		10/02/2025	\$ 1,200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
DARYL SIMS 152 HERON LANE BRONX, NY 10473				LAW ENFORCEMENT OFFICER		
				c. Employer's Name/Specific Field NEW YORK STATE		
				e. Election Sum to Date		
				\$ 350.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	J4K	Electric Funds Tran		10/14/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
KARL STROHMINGER 160 UNION STREET CONCORD, NC 28025				CEO DESIGN BY RKS LLC		
				c. Employer's Name/Specific Field DESIGN BY RKS		
				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	
☐	J4K	Credit Card		10/10/2025	\$ 500.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 1,800.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,775.00	

Contributions from Individuals

Pg 5 of 5

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	
FRIENDS OF JUSTIN LEWTER					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
AUBREY WITHERSPOON 7603 DUSKY PINE DR CHARLOTTE, MECKLENBURG 28215			COMPUTER OPERATOR		
			c. Employer's Name/Specific Field CHARTER COMMUNICATIONS		
			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
☐	J4K	Electric Funds Tran		10/02/2025	\$ 100.00
☐					\$
☐					\$
4. Total only this Page					\$ 100.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,775.00

CRO-1210

NC State Board of Elections

April 2007

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
FRIENDS OF JUSTIN LEWTER						
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	J4K	Electric Funds Tran	O	10/14/2025	\$ 7.45	CONSULTING
☐ Add ☐ Remove	J4K	Debit Card	O	09/29/2025	\$ 14.29	Q&A WITH CANDIDATE
☐ Add ☐ Remove	J4K	Debit Card	C	10/14/2025	\$ 11.43	Q&A CAMPAIGN
4. Total only this Page					\$ 33.17	
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 33.17	
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		H* - Holding Public Office Expenses		
I - Postage		J - Penalties		K* - Office Expenses		
O* - Other				Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

Disbursements

Pg 1 of 3

Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
FRIENDS OF JUSTIN LEWTER							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BIGVU INC 135 WEST 50TH STREET NEW YORK, NY 10020				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 106.99	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	A	10/06/2025	\$ 106.99	TELEPROTER		
				\$	SUBSCRIPTION		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
TIARRA DAVIS 3367 BRIDGEVILLE RALEIGH, NC 27610				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 4,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Electric Funds Tran	E	09/30/2025	\$ 2,000.00			
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
EAST COAST WINGS 2263 SPIDER DR. KANNAPOLIS, NC 28083 (704) 720-0511				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 64.16	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	O	09/24/2025	\$ 64.16	FOOD		
				\$			
5. Total only this Page						\$ 2,171.15	
6. Total of ALL CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						\$ 5,289.30	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 2 of 3

Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
FRIENDS OF JUSTIN LEWTER							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
KAA MACC 1579 KINGSTON DR KANNAPOLIS, NC 28083				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 206.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	O	10/09/2025	\$ 206.00	CAMPAIGN TRAIL		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
MINUTEMAN PRESS MCGILL AVENUE CONCORD, NC 28027				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 3,185.91	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	B	09/24/2025	\$ 933.08	PALM CARDS FOR		
J4K	Debit Card	B	09/29/2025	\$ 215.33	CANDIDATE CAMPAIGN MATERIALS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
MINUTEMAN PRESS MCGILL AVENUE CONCORD, NC 28027				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 3,185.91	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	B	10/15/2025	\$ 810.56	POSTCARDS		
				\$			
5. Total only this Page						\$ 2,164.97	
6. Total of ALL CRO-1310 Pages							
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						\$ 5,289.30	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 3 of 3

Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
FRIENDS OF JUSTIN LEWTER							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
POST OFFICE 1040 DALE EARNHARDT BLVD KANNAPOLIS, NC 28083				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 610.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	I	10/17/2025	\$ 610.00			
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
QUEEN CITY TEE 3435 CAMP JULIA ROAD KANNAPOLIS, NC 28083				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 224.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	O	10/14/2025	\$ 224.00	CAMPAIGN TEE SHIRTS		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
VISTAPRINT VISTAPRINT.COM VENLO 18662074955				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 119.18	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J4K	Debit Card	B	10/10/2025	\$ 119.18	POSTCARDS		
				\$			
5. Total only this Page						\$ 953.18	
6. Total of ALL CRO-1310 Pages							
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						\$ 5,289.30	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							