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
COMMITTEE TO ELECT MISHELL WILLIAMS	

b. Mailing Address (include City, State and Zip Code)	d. Date Filed
PO BOX 1361 HARRISBURG, NC 28075	10/26/2026
	e. Phone Number

RECEIVED IN-PERSON
OCT 26 2026
CABARRUS COUNTY BOARD OF ELECTIONS

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2026	07/01/2026	10/17/2026	SONYA RORIE

6. Type of Committee (Check One)

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

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

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ Presidential Election Year Candidates Fund
- ☐ NC Public Campaign Financing Fund
- ☐ Other:

8. Number of Fundraisers this Report

2

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☒ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

3. Account Information

a. Financial Institution Full Name	
TRUIST	

b. Purpose	c. Account Code
ELECTION CAMPAIGN ACCOUNT	MW
	d. Period Begin Balance
	$ 3,814.62

3. Account Information

a. Financial Institution Full Name	

b. Purpose	c. Account Code
	d. Period Begin Balance
	$

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board

Sonya Rorie — Printed Name of Signer

Sonya Rorie — Signature of Appointed Treasurer

10/26/2026 — Date

FOR OFFICE USE ONLY

Date Received:	10-26-26	Employee:	TC
Date Postmarked:		Employee:	
Date Scanned:	10-26-26	Employee:	DAN
Date Data Entered:		Employee:	

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☑ 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
COMMITTEE TO ELECT MISHELL WILLIAMS	2026 Third Quarter	

Start of Election Cycle: January 1, 2025		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 3,814.62	$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 2,744.00	$ 4,785.06
6) Contributions from Individuals	*(CRO-1210)*	$ 6,593.84	$ 13,554.84
7) Contributions from Political Party Committees	*(CRO-1220)*	$ 0.00	$ 0.00
8) Contributions from Other Political Committees	*(CRO-1230)*	$ 500.00	$ 500.00
9) Loan Proceeds	*(CRO-1410)*	$ 0.00	$ 2,060.00
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)		$ 9,837.84	$ 20,899.90
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 8,269.19	$ 12,063.27
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$ 0.00	$ 0.00
13c) Coordinated Party Expenditures	*(CRO-1310)*	$ 0.00	$ 0.00
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 516.38	$ 819.74
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)*	$ 770.84	$ 3,920.84
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 9,556.41	$ 16,803.85
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 4,096.05	$ 4,096.05
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	*(CRO-1330)*	$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	*(CRO-1430)*	$ 2,060.00	
22) Debts and Obligations owed by the Committee	*(CRO-1610)*	$ 0.00	
23) Debts and Obligations owed to the Committee	*(CRO-1620)*	$ 0.00	
24) Account Transfers Within the Committee	*(CRO-1720)*	$ 0.00	
25) Administrative Support	*(CRO-1710)*	$ 0.00	$ 0.00
26) Forgiven Loans	*(CRO-1440)*	$ 0.00	$ 0.00
27) 48-Hour Notice Reports Sum	*(CRO-2220)*	$ 0.00	$ 0.00
28) Contributions to be Refunded	*(CRO-1215)*	$ 0.00	$ 0.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Credit Card		09/08/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		08/12/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/15/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		07/15/2026	$ 25.00
☐ Add ☐ Remove	MW	Cash		10/05/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		07/13/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		10/14/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		07/31/2026	$ 5.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/08/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		09/23/2026	$ 50.00
☐ Add ☐ Remove	MW	Cash		10/11/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/06/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/15/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		07/30/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		07/16/2026	$ 25.00
☐ Add ☐ Remove	MW	Draft		08/18/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/30/2026	$ 25.00
☐ Add ☐ Remove	MW	Cash		10/11/2026	$ 20.00
☐ Add ☐ Remove	MW	Credit Card		07/31/2026	$ 25.00

4. Total only this Page	$	$710.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$	$2,744.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Credit Card		07/15/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		08/19/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/08/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		10/02/2026	$ 50.00
☐ Add ☐ Remove	MW	Draft		08/11/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/21/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		09/21/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		09/30/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/21/2026	$ 26.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/19/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		10/15/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/08/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/14/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		10/09/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/03/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/14/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/16/2026	$ 50.00
☐ Add ☐ Remove	MW	Cash		10/11/2026	$ 40.00
☐ Add ☐ Remove	MW	Credit Card		07/02/2026	$ 15.00
☐ Add ☐ Remove	MW	Credit Card		09/09/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/08/2026	$ 25.00

4. Total only this Page	$	$776.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$	$2,744.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Credit Card		09/21/2026	$ 40.00
☐ Add ☐ Remove	MW	Credit Card		09/22/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		09/23/2026	$ 26.00
☐ Add ☐ Remove	MW	Credit Card		07/30/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/21/2026	$ 26.00
☐ Add ☐ Remove	MW	Cash		10/11/2026	$ 20.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		10/09/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		07/30/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/18/2026	$ 40.00
☐ Add ☐ Remove	MW	Credit Card		10/15/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/30/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/21/2026	$ 26.00
☐ Add ☐ Remove	MW	Credit Card		09/09/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/22/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 20.00
☐ Add ☐ Remove	MW	Credit Card		09/21/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		07/24/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/23/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/15/2026	$ 25.00

4. Total only this Page	$ $683.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $2,744.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Credit Card		08/21/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/21/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		07/17/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/21/2026	$ 20.00
☐ Add ☐ Remove	MW	Credit Card		07/15/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/23/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		08/19/2026	$ 50.00
☐ Add ☐ Remove	MW	Cash		10/11/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/21/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/30/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		09/08/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		08/07/2026	$ 25.00
☐ Add ☐ Remove	MW	Credit Card		09/10/2026	$ 30.00
☐ Add ☐ Remove	MW	Credit Card		10/15/2026	$ 50.00
☐ Add ☐ Remove	MW	Credit Card		10/07/2026	$ 50.00

4. Total only this Page	$	$575.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$	$2,744.00

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ISRA ALLISON 2930 WESLEY AVENUE CHARLOTTE, NC 28205	DEP POLITICAL DIRECTOR	DOWN HOME		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MW	Credit Card		06/24/2026	$ 25.00
☐	MW	Credit Card		07/09/2026	$ 50.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
VALENCIA APPLEWHITE 9645 Camden Town Drive NW FAYETTVILLE, NC 28314-2108	REAL ESTATE AGENT	SELF EMPLOYED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		08/12/2026	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KIMBERLY BIONDI 928 PINERIDGE STREET SE CONCORD, NC 28025	TEACHER	CABARRUS COUNTY SCHOOLS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/15/2026	$ 50.00
☐	MW	Credit Card		10/07/2026	$ 50.00
☐					$

4. Total only this Page	$ 250.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHANNA BOCKO 824 JUANITA DRIVE SW CONCORD, NC 28027	NOT EMPLOYED	NOT EMPLOYED		$ 101.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MW	Credit Card		06/02/2026	$ 25.00
☒	MW	Credit Card		06/23/2026	$ 25.00
☐	MW	Credit Card		07/15/2026	$ 25.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHANNA BOCKO 824 JUANITA DRIVE SW CONCORD, NC 28027	NOT EMPLOYED	NOT EMPLOYED		$ 101.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/22/2026	$ 26.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAYMOND BRYANT-HERRON 199 MCKINNON AVE NE CONCORD, NC 28025	ORGANIZER	SELF EMPLOYED		$ 301.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		08/21/2026	$ 50.00
☐	MW	Credit Card		09/09/2026	$ 25.00
☐	MW	Credit Card		09/21/2026	$ 26.00

4. Total only this Page	$ 152.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAYMOND BRYANT-HERRON 199 MCKINNON AVE NE CONCORD, NC 28025	ORGANIZER	SELF EMPLOYED		$ 301.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/07/2026	$ 100.00
☐	MW	Credit Card		10/15/2026	$ 100.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
APRIL CLARK 124 ERVIN AVE NW CONCORD, NC 28025	ACCOUNTING TECHNICIAN II	CITY OF CONCORD		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		08/11/2026	$ 25.00
☐	MW	Credit Card		09/09/2026	$ 25.00
☐	MW	Credit Card		09/22/2026	$ 25.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ALICE DAVIS 446 Winfield Blvd SE CONCORD, NC 28025	RETIRED NOT EMPLOYED	RETIRED NOT EMPLOYED		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Check		09/02/2026	$ 500.00
☐					$
☐					$

4. Total only this Page	$ 775.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JEANNE DIXON 1840 ENOCHVILLE ROAD KANNAPOLIS, NC 28081	NOT EMPLOYED	NOT EMPLOYED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/02/2026	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ANNA DOLLAR 1523 PORTERS COURT CONCORD, NC 28025	NOT EMPLOYED	NOT EMPLOYED		$ 51.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/21/2026	$ 26.00
☐	MW	Credit Card		10/15/2026	$ 25.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LIESEL DOOLITTLE 8401 PIN OAK COURT HARRISBURG, NC 28075	ACTUARY	TIAA		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		07/17/2026	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 251.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ANDREA ENGBER 11111 JIM SOSSOMAN ROAD MIDLAND, NC 28107	NOT EMPLOYED	NOT EMPLOYED		$ 220.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		07/20/2026	$ 30.00
☐	MW	Credit Card		09/09/2026	$ 20.00
☐	MW	Credit Card		10/02/2026	$ 20.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ANDREA ENGBER 11111 JIM SOSSOMAN ROAD MIDLAND, NC 28107	NOT EMPLOYED	NOT EMPLOYED		$ 220.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/07/2026	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARTIN ERICSON 788 COURTNEY STREET SE CONCORD, NC 28025	ACCOUNTANT	NOT EMPLOYED		$ 125.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MW	Credit Card		05/20/2026	$ 25.00
☒	MW	Credit Card		06/18/2026	$ 25.00
☐	MW	Credit Card		07/20/2026	$ 25.00

4. Total only this Page	$ 145.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARTIN ERICSON 788 COURTNEY STREET SE CONCORD, NC 28025	ACCOUNTANT	NOT EMPLOYED		$ 125.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		08/19/2026	$ 25.00
☐	MW	Credit Card		09/18/2026	$ 25.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PAMELA ESCOBAR 1115 ANDUIN FALLS DRIVE CHARLOTTE, NC 28269	PUBLIC INFORMATION OFFICER	MECKLENBURG COUNTY		$ 51.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/22/2026	$ 26.00
☐	MW	Credit Card		10/07/2026	$ 25.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KIALA FELDER 7020 Winding Cedar Trl HARRISBURG, NC 28075	CPA	BOA		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/01/2026	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 201.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
COURTNEY FOLDEN 216 Hahn Place Southeast CONCORD, NC 28025	NOT EMPLOYED	NOT EMPLOYED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/15/2026	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CARRIE GIBSON 3213 VERMILLION DRI= HARRISBURG, NC 28075	NOT EMPLOYED	NOT EMPLOYED		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Check		10/14/2026	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LATRECIA GLOVER 4324 ABERNATHY PLACE HARRISBURG, NC 28075	SOCIAL WORKER	CABARRUS COUNTY SCHOOLS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		08/07/2026	$ 50.00
☐	MW	Credit Card		10/07/2026	$ 50.00
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MACK HUMPHERY 62 WOODSDALE PLACE SE CONCORD, NC 28025	RETIRED	FAA		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Check		07/23/2026	$ 100.00
☐	MW	Check		08/11/2026	$ 200.00
☐	MW	Cash		10/05/2026	$ 50.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MACK HUMPHERY 62 WOODSDALE PLACE SE CONCORD, NC 28025	RETIRED	FAA		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Cash		10/11/2026	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
YVONNE HUMPHERY 11031 Gulkana Circle ANCHORAGE, AK 99577	DIRECTOR	Anchorage Coalition to End Homelessness		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/21/2026	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LUVENIA HUMPHREY 6929 Dover Court HIGHLAND, CA 92346	NOT EMPLOYED	NOT EMPLOYED		$ 52.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/24/2026	$ 52.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LEONARD JARVIS 532 Southern Oak Avenue NW CONCORD, NC 28027	SALES	BAYLIS AND GEIST		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/07/2026	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KAREN KASER ODOR PO BOx 97 CONCORD, NC 28026	RETIRED CLERGY	RETIRED CLERGY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/15/2026	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 252.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LUCAS KLAUSS 177 SPRING ST SW CONCORD, NC 28025	LIBRARY ASSISTANT	CABARRUS CO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MW	Credit Card		06/03/2026	$ 20.00
☐	MW	Credit Card		07/02/2026	$ 20.00
☐	MW	Credit Card		08/03/2026	$ 20.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LUCAS KLAUSS 177 SPRING ST SW CONCORD, NC 28025	LIBRARY ASSISTANT	CABARRUS CO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/02/2026	$ 20.00
☐	MW	Credit Card		10/02/2026	$ 20.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHRISTINE LAMPEL 205 Edgewater Dr NW CONCORD, NC 28027	DIRECT SUPPORT	INREACH		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/09/2026	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 180.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LISA LEA 469 Havenbrook Way NW CONCORD, NC 28027	NOT EMPLOYED	NOT EMPLOYED		$ 95.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/07/2026	$ 95.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WENDY MCCONNELL 1113 HANOVER DRIVE NW CONCORD, NC 28027	TRAINER	SELF EMPLOYED		$ 645.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		07/27/2026	$ 200.00
☐		In-Kind	FOOD	10/04/2026	$ 425.00
☐	MW	Cash		10/05/2026	$ 20.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LAURIE MILLER 90 Glendale Avenue SE CONCORD, NC 28026	NOT EMPLOYED	NOT EMPLOYED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/08/2026	$ 50.00
☐	MW	Credit Card		10/09/2026	$ 50.00
☐					$

4. Total only this Page	$ 840.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOE MITCHELL 628 Channing Circle NW CONCORD, NC 28027	ENGINNER	CELGARD		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/07/2026	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SCOTT PAGEANT 693 UNION STREET CONCORD, NC 28025	RETIRED NOT EMPLOYED	RETIRED NOT EMPLOYED		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Check		08/27/2026	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LATRIECE PRINCE WHEELER 5927 HIGH MEADOW ALEXANDRIA, VA 22310	FEDERAL	FEDERAL		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		07/08/2026	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 800.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
FRANK RANKIN III 3795 Rankin Road CONCORD, NC 28027				$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/02/2026	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KESHIA SANDIDGE 270 POST OAK AVE SW CONCORD, NC 28025	SOCIAL WORKER	PARTNERS		$ 697.84

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		08/11/2026	$ 50.00
☐	MW	Credit Card		09/08/2026	$ 150.00
☐	MW	Credit Card		09/21/2026	$ 26.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KESHIA SANDIDGE 270 POST OAK AVE SW CONCORD, NC 28025	SOCIAL WORKER	PARTNERS		$ 697.84

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		09/21/2026	$ 26.00
☐	MW	Credit Card		10/07/2026	$ 100.00
☐		In-Kind	FOOD	10/12/2026	$ 345.84

4. Total only this Page	$ 1,197.84
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARY SHEA 8574 Mallory Lane HARRISBURG, NC 28075	NOT EMPLOYED	NOT EMPLOYED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		10/15/2026	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DEBORAH SMITH 30 EASTCLIFF DRIVE CONCORD, NC 28025	NOT EMPLOYED RETIRED	NOT EMPLOYED RETIRED		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Check		08/27/2026	$ 250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BENNIE WILLIAMS 16712 SCOTTSDALE BLVD SHAKER HEIGHTS, OH 44120	NOT EMPLOYED	NOT EMPLOYED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Check		08/07/2026	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 450.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

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 MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WENDY M WOOD 717 UNION STREET SOUTH CONCORD, NC 28025	NOT EMPLOYED	NOT EMPLOYED		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MW	Credit Card		08/20/2026	$ 100.00
☐	MW	Credit Card		09/23/2026	$ 100.00
☐					$

4. Total only this Page	$ 200.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,593.84

Contributions from Other Political Committees Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
VOTEMAMA 445 BROAD HOLLOW ROAD SUITE 25 NO 19 MELVILLE, NY 11747	☐ Candidate ☒ PAC ☐ Referendum c. Level Registered (Specify) ☒ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 500.00

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
MW	Electric Funds Tran		07/30/2026	$ 500.00
				$
				$

4. Total only this Page	$ $500.00
5. Total of ALL CRO-1230 Pages *(This line must be on line 8 of Detailed Summary Page CRO-1100)*	$ $500.00

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
COMMITTEE TO ELECT MISHELL WILLIAMS	

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

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
META PLATFORMS, INC. 1601 WILLOW ROAD MELO PARK, CA 94025	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 34.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MW	Debit Card	A	10/13/2026	$ 17.00	AD
MW	Debit Card	A	10/15/2026	$ 17.00	AD

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PC SIGNS 180 HEIN DRIVE GARNER, NC 27529	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1,853.09

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MW	Check	B	08/14/2026	$ 1,853.09	YARD SIGNS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
RACHEL PHIPPS 347 PARKVIEW COURT SW CONCORD, NC 28025	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 2,100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MW	Check	E	07/14/2026	$ 700.00	
MW	Check	E	08/19/2026	$ 350.00	

5. Total only this Page	$ 2,937.09
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 8,269.19

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
COMMITTEE TO ELECT MISHELL WILLIAMS	

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

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
RACHEL PHIPPS 347 PARKVIEW COURT SW CONCORD, NC 28025	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 2,100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MW	Check	E	09/15/2026	$ 350.00	
MW	Check	E	10/05/2026	$ 350.00	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
RED 5 PRINTING LLC 18631 NORTHLINE DRIVE CORNELIUS, NC 28031 (704) 997-6163	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1,133.10

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MW	Debit Card	AB	08/17/2026	$ 351.81	PALM CARDS
MW	Debit Card	B	09/24/2026	$ 117.99	POLL CARDS

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
RED 5 PRINTING LLC 18631 NORTHLINE DRIVE CORNELIUS, NC 28031 (704) 997-6163	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1,133.10

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MW	Debit Card	B	09/29/2026	$ 117.99	POLL CARDS
MW	Debit Card	O	10/12/2026	$ 221.64	T SHIRTS

5. Total only this Page	$ 1,509.43
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 8,269.19

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	**B* - Printing**	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donation to Legal Expense Fund**
O* Other			

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

Disbursements

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
RED 5 PRINTING LLC 18631 NORTHLINE DRIVE CORNELIUS, NC 28031 (704) 997-6163	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1,133.10

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MW	Debit Card	B	10/12/2026	$ 323.67	PALM CARDS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
THE MEDIA CORPORATIOM NC	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 3,499.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
4325	Check	B	09/24/2026	$ 3,499.00	MAILERS
				$	

5. Total only this Page	$ 3,822.67
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 8,269.19

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)**

Aggregated Non-Media Expenditures

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Draft	O	07/02/2026	$ 0.53	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/08/2026	$ 1.50	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/09/2026	$ 0.75	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/13/2026	$ 0.75	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	07/15/2026	$ 1.59	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/16/2026	$ 0.38	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/17/2026	$ 1.88	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/20/2026	$ 0.83	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/24/2026	$ 0.38	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/27/2026	$ 3.00	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/30/2026	$ 0.38	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/30/2026	$ 0.38	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/30/2026	$ 0.75	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	07/31/2026	$ 0.46	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	08/03/2026	$ 0.68	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	08/06/2026	$ 0.38	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	08/07/2026	$ 1.13	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	08/11/2026	$ 1.51	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	08/12/2026	$ 1.88	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	08/14/2026	$ 1.50	ACT BLUE FEES

4. Total only this Page	$ 20.64
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 516.38

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

	B* - Printing	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donations to Legal Expense Fund**
O* - Other			

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

Aggregated Non-Media Expenditures

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Draft	C	08/18/2026	$ 0.75	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	08/19/2026	$ 2.26	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	08/20/2026	$ 1.50	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	08/21/2026	$ 1.81	ACT BLUE FEES
☐ Add ☐ Remove	MW	Draft	C	09/02/2026	$ 7.80	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	09/08/2026	$ 6.16	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	09/09/2026	$ 2.26	ACT BLUE
☐ Add ☐ Remove	MW	Draft	CD	09/10/2026	$ 0.45	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	09/15/2026	$ 0.75	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	09/16/2026	$ 0.75	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	09/18/2026	$ 0.98	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	09/18/2026	$ 6.93	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	09/22/2026	$ 1.99	ACT BLUE FEE
☐ Add ☐ Remove	MW	Draft	C	09/23/2026	$ 3.40	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	09/24/2026	$ 0.78	ACTT BLUE
☐ Add ☐ Remove	MW	Draft	C	09/30/2026	$ 1.89	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	10/01/2026	$ 1.50	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	10/02/2026	$ 2.85	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	10/07/2026	$ 17.90	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	10/09/2026	$ 3.01	ACT BLUE

4. Total only this Page	$ 65.72
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 516.38

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

	B* - Printing	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donations to Legal Expense Fund**
O* - Other			

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

Aggregated Non-Media Expenditures

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Draft	C	10/14/2026	$ 0.75	ACT BLUE
☐ Add ☐ Remove	MW	Draft	C	10/15/2026	$ 9.03	ACT BLUE
☐ Add ☐ Remove	MW	Debit Card	K	10/12/2026	$ 28.03	POLL SUPPLIES
☐ Add ☐ Remove	MW	Debit Card	O	10/13/2026	$ 27.81	CAMPAIGN SUPPLIES
☐ Add ☐ Remove	MW	Debit Card	C	09/15/2026	$ 13.35	VOLUNTEER SNACKS
☐ Add ☐ Remove	MW	Debit Card	C	09/08/2026	$ 4.80	VOLUNTEER SNACKS
☐ Add ☐ Remove	MW	Debit Card	C	09/08/2026	$ 9.07	VOLUNTEER SNACKS
☐ Add ☐ Remove	MW	Debit Card	C	09/10/2026	$ 8.54	VOLUNTEER SNACKS
☐ Add ☐ Remove	MW	Debit Card	C	07/06/2026	$ 14.96	REFRESHMENTS
☐ Add ☐ Remove	MW	Draft	C	07/06/2026	$ 18.30	REFRESHEMENTS
☐ Add ☐ Remove	MW	Debit Card	O	07/27/2026	$ 9.49	SUPPLIES
☐ Add ☐ Remove	MW	Debit Card	O	08/04/2026	$ 24.68	CANDY AND FASTENER FOR
☐ Add ☐ Remove	MW	Debit Card	O	09/08/2026	$ 4.16	SNACKS FOR VOLUNTEERS
☐ Add ☐ Remove	MW	Draft	O	07/02/2026	$ 1.23	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/08/2026	$ 2.43	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/09/2026	$ 1.33	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/13/2026	$ 1.33	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/15/2026	$ 3.23	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/16/2026	$ 0.78	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/17/2026	$ 3.21	STRIPE FEE

4. Total only this Page	$ 186.51
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 516.38

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

	B* - Printing	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donations to Legal Expense Fund**
O* - Other			

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

Aggregated Non-Media Expenditures

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Draft	C	07/20/2026	$ 1.67	STRIIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/24/2026	$ 0.78	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/27/2026	$ 4.63	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/30/2026	$ 0.78	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/30/2026	$ 0.78	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/30/2026	$ 1.33	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	07/31/2026	$ 1.12	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/03/2026	$ 1.45	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/06/2026	$ 0.78	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/07/2026	$ 2.11	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/11/2026	$ 2.89	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/12/2026	$ 3.21	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/14/2026	$ 2.66	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/18/2026	$ 1.33	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/19/2026	$ 4.22	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/20/2026	$ 2.43	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	08/21/2026	$ 3.56	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/02/2026	$ 11.90	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/08/2026	$ 10.86	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/09/2026	$ 4.45	STRIPE FEE

4. Total only this Page	$ 62.94
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 516.38

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

	B* - Printing	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donations to Legal Expense Fund**
O* - Other			

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

Aggregated Non-Media Expenditures

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

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	MW	Draft	C	09/10/2026	$ 0.89	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/15/2026	$ 1.33	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/16/2026	$ 1.33	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/18/2026	$ 1.89	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/21/2026	$ 13.14	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/22/2026	$ 4.05	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/23/2026	$ 6.12	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	09/24/2026	$ 1.37	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	CD	09/30/2026	$ 3.67	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	10/01/2026	$ 2.43	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	10/02/2026	$ 5.10	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	10/07/2026	$ 31.24	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	10/09/2026	$ 5.32	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	10/14/2026	$ 1.33	STRIPE FEE
☐ Add ☐ Remove	MW	Draft	C	10/15/2026	$ 15.73	STRIPE FEE
☐ Add ☐ Remove	MW	Debit Card	C	07/03/2026	$ 20.90	SNACKS
☐ Add ☐ Remove	MW	Debit Card	C	07/10/2026	$ 13.95	REFRESHMENTS
☐ Add ☐ Remove	MW	Debit Card	O	10/07/2026	$ 16.80	WEBSITE
☐ Add ☐ Remove	MW	Debit Card	O	08/24/2026	$ 16.99	TELECONFERENCE FEE
☐ Add ☐ Remove	MW	Debit Card	O	09/22/2026	$ 16.99	TELECONFERENCE

4. Total only this Page	$ 180.57
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 516.38

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

	B* - Printing	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donations to Legal Expense Fund**
O* - Other			

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

In-Kind Contributions

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
WENDY MCCONNELL 1113 HANOVER DRIVE NW CONCORD, NC 28027	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $ 645.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD	10/04/2026	$ 425.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
KESHIA SANDIDGE 270 POST OAK AVE SW CONCORD, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $ 697.84

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD	10/12/2026	$ 345.84
		$
		$

4. Total only this Page	$ 770.84
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 770.84

Outstanding Loans

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MISHELL WILLIAMS	

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Start Date (mm/dd/yyyy)	f. End Date (mm/dd/yyyy)
MISHELL WILLIAMS 5209 BUTTERNUT DRIVE CHARLOTTE, NC 28215	HOMEMAKER	NOT EMPLOYED		03/04/2026	

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	k. Full Name of Lending Institution	l. Loan Number
%		$ 500.00	$ 500.00		

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Start Date (mm/dd/yyyy)	f. End Date (mm/dd/yyyy)
MISHELL WILLIAMS 5209 BUTTERNUT DRIVE CHARLOTTE, NC 28215	HOMEMAKER	NOT EMPLOYED		03/06/2026	

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	k. Full Name of Lending Institution	l. Loan Number
%		$ 1,560.00	$ 1,560.00		

4. Total only this Page	$ 2,060.00
5. Total of ALL CRO-1430 Pages *(This line must be on line 21 of Detailed Summary Page CRO-1100)*	$ 2,060.00