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 LORI CLAY	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
104 WASHINGTON LANE SE CONCORD, NC 28025	10/08/2025
	e. Phone Number

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	07/18/2025	09/23/2025	DEBORAH BAMFORD

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

0

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		
UWHARRIE BANK		
b. Purpose	**c. Account Code**	**d. Period Begin Balance**
FOR CAMPAIGN RELATED ACTIVITY	LC	$

3. Account Information

a. Financial Institution Full Name		
b. Purpose	**c. Account Code**	**d. Period Begin Balance**
		$

RECEIVED IN-PERSON
OCT 08 2025
CABARRUS COUNTY BOARD OF ELECTIONS

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

Deborah Bamford — Printed Name of Signer

Deborah Bamford — Signature of Appointed Treasurer

10/08/2025 — Date

FOR OFFICE USE ONLY

Date Received:	10-8-25	Employee	WAN
Date Postmarked:		Employee	
Date Scanned:	10-8-25	Employee	WAN
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 LORI CLAY	2025 Thirty-five-day	

Start of Election Cycle: January 1, 2025		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 510.00	$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 470.00	$ 470.00
6) Contributions from Individuals	*(CRO-1210)*	$ 11,254.89	$ 11,692.89
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	$ 260.00
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)		$ 11,724.89	$ 12,422.89
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 6,538.20	$ 6,538.20
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)*	$ 96.81	$ 96.81
15) Loan Repayments	*(CRO-1420)*	$ 260.00	$ 260.00
16) Refunds/Reimbursements from the Committee	*(CRO-1320)*	$ 340.00	$ 340.00
17) In-Kind Contributions	*(CRO-1510)*	$ 4,244.89	$ 4,432.89
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 11,479.90	$ 11,667.90
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 754.99	$ 754.99
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	*(CRO-1330)*	$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	*(CRO-1430)*	$ 0.00	
22) Debts and Obligations owed by the Committee	*(CRO-1610)*	$ 0.00	
23) Debts and Obligations owed to the Committee	*(CRO-1620)*	$ 0.00	
24) Account Transfers Within the Committee	*(CRO-1720)*	$ 0.00	
25) Administrative Support	*(CRO-1710)*	$ 0.00	$ 0.00
26) Forgiven Loans	*(CRO-1440)*	$ 0.00	$ 0.00
27) 48-Hour Notice Reports Sum	*(CRO-2220)*	$ 0.00	$ 0.00
28) Contributions to be Refunded	*(CRO-1215)*	$ 0.00	$ 0.00

Aggregated Contributions from Individuals

Page 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
COMMITTEE TO ELECT LORI CLAY	

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	LC	Cash		08/22/2025	$ 50.00
☐ Add ☐ Remove	LC	Cash		08/22/2025	$ 50.00
☐ Add ☐ Remove	LC	Electric Funds Tran		08/20/2025	$ 50.00
☐ Add ☐ Remove	LC	Check		08/22/2025	$ 50.00
☐ Add ☐ Remove	LC	Electric Funds Tran		08/20/2025	$ 50.00
☐ Add ☐ Remove	LC	Check		08/22/2025	$ 50.00
☐ Add ☐ Remove	LC	Electric Funds Tran		09/04/2025	$ 50.00
☐ Add ☐ Remove	LC	Cash		08/22/2025	$ 20.00
☐ Add ☐ Remove	LC	Check		08/22/2025	$ 50.00
☐ Add ☐ Remove	LC	Cash		08/22/2025	$ 50.00

4. Total only this Page	$ $470.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $470.00

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 LORI CLAY	

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
GINA AIRHEART 4650 PONDEROSA LANE CONCORD, NC 28025	RETIRED	CCS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Cash		08/22/2025	$ 50.00
☐	LC	Cash		08/26/2025	$ 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
EDITH C BARNHARDT 49 PATTON COURT SE CONCORD, NC 28025	HOMEMAKER	HOMEMAKER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 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
WILLIAM BICKEL 6039 VILLAGE DRIVE NW CONCORD, NC 28027 (919) 656-5588	RETIRED	MILITARY		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 150.00
☐					$
☐					$

4. Total only this Page	$ 350.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 11,254.89

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 LORI CLAY	

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
LORI BLANKENSHIP 5144 BECKENHAM LANE CONCORD, NC 28025	RETIRED	BROOME SIGN COMPANY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Cash		08/22/2025	$ 50.00
☐	LC	Cash		08/26/2025	$ 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
GRANT CAMPBELL 4647 OWL CREEK LANE CONCORD, NC 28027 (704) 604-2575	PHYSICIAN	ATRIUM HEALTH		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Electric Funds Tran		08/22/2025	$ 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
JEAN CHANDLER 4977 HILTON LAKE ROAD KANNAPOLIS, NC 28083 (980) 621-3478	RETIRED	CENSUS OFFICE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 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)*	$ 11,254.89

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 LORI CLAY	

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
CARLA CLAY 417 CHANNING CIRCLE NW CONCORD, NC 28027	OFFICE MANAGER	CONCORD PEDIATRIC DENTISTRY		$ 1,500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/15/2025	$ 1,500.00
☐					$
☐					$

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
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	OWNER	PREMIUM POWER SYSTEMS		$ 3,904.89

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	In-Kind	CAMPAIGN KICK OFF	07/18/2025	$ 196.35
☐	LC	In-Kind	YARD SIGNS	07/18/2025	$ 659.28
☐	LC	In-Kind	YARD SIGNS	07/21/2025	$ 770.44

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
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	OWNER	PREMIUM POWER SYSTEMS		$ 3,904.89

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	In-Kind	FOOD	08/01/2025	$ 3.21
☐	LC	In-Kind	LUNCH WITH CONSULTANT	08/04/2025	$ 27.76
☐	LC	In-Kind	LUNCH WITH CONSULTANT	08/07/2025	$ 36.47

4. Total only this Page	$ 3,193.51
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 11,254.89

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 LORI CLAY	

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
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	OWNER	PREMIUM POWER SYSTEMS		$ 3,904.89

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	In-Kind	FOOD FROM PRESS AND PORTER	08/10/2025	$ 6.08
☐	LC	In-Kind	FOOD FROM PRESS AND PORTER	08/12/2025	$ 8.08
☐	LC	In-Kind	VIDEO ADVERTISING	08/12/2025	$ 1,500.00

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
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	OWNER	PREMIUM POWER SYSTEMS		$ 3,904.89

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	In-Kind	FOOD FROM PRESS AND PORTER	08/16/2025	$ 12.30
☐	LC	In-Kind	EVENT AT TWO GALS	08/20/2025	$ 72.40
☐	LC	In-Kind	EVENT AT TWO GALS	08/20/2025	$ 389.48

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
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	OWNER	PREMIUM POWER SYSTEMS		$ 3,904.89

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	In-Kind	FOOD FROM PRESS AND PORTER	08/21/2025	$ 12.63
☐	LC	In-Kind	VIDEO PRODUCTION	08/25/2025	$ 250.00
☐	LC	In-Kind	OJ FOR CPD	08/29/2025	$ 68.00

4. Total only this Page	$ 2,318.97
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 11,254.89

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 LORI CLAY	

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
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	OWNER	PREMIUM POWER SYSTEMS		$ 3,904.89

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	In-Kind	CAMPAIGN BUTTONS	09/05/2025	$ 50.00
☐	LC	In-Kind	FLAGS FOR FAIR	09/05/2025	$ 101.64
☐	LC	In-Kind	FLOWERS FOR FAIR	09/06/2025	$ 80.77

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
CHRIS CRANSTON 475 HIGH MEADOWS DRIVE CONCORD, NC 28025	SELF EMPLOYED	CRANSTON FLOORING		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Cash		08/22/2025	$ 50.00
☐	LC	Cash		08/26/2025	$ 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
SID CRANSTON 755 SILVER FOX DRIVE CONCORD, NC 28025	RETIRED	BEST EFFORTS		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Cash		08/22/2025	$ 50.00
☐	LC	Cash		08/26/2025	$ 10.00
☐					$

4. Total only this Page	$ 392.41
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 11,254.89

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 LORI CLAY	

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
BETTY EDWARDS 1521 DAYBREAK RIDGE ROAD KANNAPOLIS, NC 28081	BOOKKEEPER	EDWARDS BOOKKEEPING		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 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
LINDA GOLDING HARRIS 1726 PARK GROVE PLACE CONCORD, NC 28027	SELF EMPLOYED	REAL ESTATE AGENT		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 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
RANDY W HOPKINS 287 UNION STREET S CONCORD, NC 28025 (704) 618-5118	SELF EMPLOYED	COMMERCIAL REAL ESTATE		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 150.00
☐					$
☐					$

4. Total only this Page	$ 900.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 11,254.89

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 LORI CLAY	

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
CHARLES A JAMES P O BOX 68 MOUNT PLEASANT, NC 28124	RETIRED	MILL OWNER		$ 1,100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/08/2025	$ 1,100.00
☐					$
☐					$

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
LAURA LINDSEY 5807 STRATFORD COURT HARRISBURG, NC 28075	REFERRALS	ATRIUM HEALTH		$ 1,050.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Electric Funds Tran		08/20/2025	$ 50.00
☐	LC	Check		09/16/2025	$ 1,000.00
☐					$

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
CHRISTOPHER MEASMER 19 PADDINGTON DRIVE SW CONCORD, NC 28025 (704) 783-5880	OWNER	WAYSIDE RESTAURANT		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 250.00
☐					$
☐					$

4. Total only this Page	$ 2,400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 11,254.89

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 LORI CLAY	

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
REX MEASMER 6300 HOMESTEAD DRIVE CONCORD, NC 28025	OWNER	WAYSIDE RESTAURANT		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 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
HUGH MORRISON 545 HERMITAGE DRIVE SE CONCORD, NC 28025	OWNER	HERMITAGE ASSOCIATES		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		09/04/2025	$ 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
JIM QUICK 126 SPENCER AVENUE NW CONCORD, NC 28025 (704) 796-3882	MARKETING MANAGER	REDFONT		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Electric Funds Tran		08/19/2025	$ 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)*	$ 11,254.89

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 LORI CLAY	

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
GREG RIFFE PO BOX 264 HARRISBURG, NC 28075 (704) 791-1379	SELF EMPLOYED	GAR ENGINEERING SERVICES		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 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
TOM SMALL 462 BROOK VALLEY COURT CONCORD, NC 28025 (704) 793-8199	RETIRED	REAL ESTATE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/22/2025	$ 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
RONALD D SMITH P O BOX 898 BANNER ELK, NC 28604-0898	OWNER	SUNNUBROOK KENNEL		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		09/04/2025	$ 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)*	$ 11,254.89

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 LORI CLAY	

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
RONALD H SMITH 118 OVERBROOK DRIVE CONCORD, NC 28025-9551	FINANCIAL ADVISOR	EDWARD JONES		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Check		08/26/2025	$ 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
KATHY SUMMER 1045 OAK TRAIL CIRCLE CONCORD, NC 28025	RETIRED	NOVANT HEALTH		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	LC	Electric Funds Tran		08/20/2025	$ 250.00
☐					$
☐					$

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)*	$ 11,254.89

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 LORI CLAY	

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
4 ALL PROMOS 50 WEST AVENUE ESSEX, CT 06426	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 227.71

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Debit Card	O	08/21/2025	$ 227.71	CHAPSTICKS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
BEASLEY MEDIA 4045 N HIMES AVE TAMPA, FL 33607	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 2,000.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Check	A	09/09/2025	$ 2,000.00	BILLBOARD
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CABARRUS COUNTY GOVERNMENT 65 CHURCH STREET N CONCORD, NC 28025	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 150.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Debit Card	O	08/12/2025	$ 150.00	BOOTH FOR FAIR
				$	

5. Total only this Page	$ 2,377.71
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)*	$ 6,538.20

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 LORI CLAY	

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	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
CAMERON OUTDOOR 805 TRADE ST NW STE 101 CONCORD, NC 28027		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 900.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Check	A	09/17/2025	$ 900.00	BILLBOARD
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
CELLAR DOOR 2 UNION STREET S CONCORD, NC 28025		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 74.90

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Debit Card	O	08/21/2025	$ 74.90	WINE FOR EVENT
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
DAVID CONRAD PHOTOGRAPHY 1389 LLOYD PLACE NW CONCORD, NC 28027		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 1,000.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Check	A	08/21/2025	$ 1,000.00	ADVERTISING
				$	

5. Total only this Page	$ 1,974.90
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)*	$ 6,538.20

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 LORI CLAY	

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	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
LAMAR COMPANIES 6597 PEACHTREE INDUSTRIAL BLVD PEACHTREE CORNERS, GA 30092		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 975.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Check	A	09/19/2025	$ 975.00	ADVERTISING
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
SHIPLEY DO-NUTS 25 OPTICAL COURT NW CONCORD, NC 28025		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 109.49

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Debit Card	O	08/29/2025	$ 109.49	DONUTS FOR POLICE
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
SOUTHERN STRAIN 165 BRUMLEY AVENUE NE CONCORD, NC 28025		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 300.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Debit Card	A	08/20/2025	$ 300.00	ADVERTISING
				$	

5. Total only this Page	$ 1,384.49
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)*	$ 6,538.20

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 LORI CLAY	

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
THE CIERGE GROUP LLC 432 CEDAR HILL LANE RALEIGH, NC 27609	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 801.10

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
LC	Debit Card	B	08/15/2025	$ 801.10	SIGNS
				$	

5. Total only this Page	$ 801.10
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)*	$ 6,538.20

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 LORI CLAY	

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	LC	Debit Card	O	09/05/2025	$ 14.96	RIBBON FOR FLAGS
☐ Add ☐ Remove	LC	Debit Card	O	09/05/2025	$ 42.75	CANDY FOR FAIR
☐ Add ☐ Remove	LC	Electric Funds Tran	O	08/19/2025	$ 4.30	ANEDOT FEE
☐ Add ☐ Remove	LC	Electric Funds Tran	O	08/22/2025	$ 17.20	ANEDOT FEE
☐ Add ☐ Remove	LC	Electric Funds Tran	O	08/24/2025	$ 10.30	ANEDOT FEE
☐ Add ☐ Remove	LC	Electric Funds Tran	O	09/05/2025	$ 2.30	ANEDOT FEE
☐ Add ☐ Remove	LC	Electric Funds Tran	O	08/08/2025	$ 5.00	BANK FEE

4. Total only this Page	$ 96.81
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 96.81

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)**

Loan Repayments

Pg 1 of 1 | Amendment ☒ Yes ☐ No

Use this form to report payments on an existing loan.

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

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025 (980) 322-7088	c. Original Loan Date: 07/16/2025 d. Original Loan Amount: $ 260.00

e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount
$ 0.00	LC	Electric Funds Tran	08/19/2025	$ 260.00
$				$

4. Total only this Page	$ 260.00
5. Total of ALL CRO-1420 Pages *(This line must be on line 15 of Detailed Summary Page CRO-1100)*	$ 260.00

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment ☒ Yes ☐ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

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

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	h. Original Receipt Date 08/12/2025
		i. Original Receipt Amount $ 1,500.00

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose Code	j. Election Sum to Date
OWNER	PREMIUM POWER SYSTEMS	P	$ 3,904.89

k. Account Code	l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
LC	Electric Funds Tran	REIMBURSEMENT FOR ADVERTISING - PERSONAL FUNDS	09/17/2025	$ 340.00

4. Total only this Page	$ 340.00
5. Total of ALL CRO-1320 Pages *(This line must be on line 15 of Detailed Summary Page CRO-1100)*	$ 340.00

6. Purpose Codes (List detailed disbursement code in (f) above)

L - Returned to Contributor M - Overpayment for Service N - Exceeded Contibution Limit
P* - Reimbursement of In-Kin O* Other
* Codes require detailed explanation in required remarks field (m)

In-Kind Contributions

Pg 1 of 2 | 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 LORI CLAY	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source		$ 3,904.89

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN KICK OFF	07/18/2025	$ 196.35
YARD SIGNS	07/18/2025	$ 659.28
YARD SIGNS	07/21/2025	$ 770.44

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source		$ 3,904.89

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD	08/01/2025	$ 3.21
LUNCH WITH CONSULTANT	08/04/2025	$ 27.76
LUNCH WITH CONSULTANT	08/07/2025	$ 36.47

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source		$ 3,904.89

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FROM PRESS AND PORTER	08/10/2025	$ 6.08
FOOD FROM PRESS AND PORTER	08/12/2025	$ 8.08
VIDEO ADVERTISING	08/12/2025	$ 1,500.00

4. Total only this Page	$ 3,207.67
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 4,244.89

In-Kind Contributions

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 LORI CLAY	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 3,904.89

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FROM PRESS AND PORTER	08/16/2025	$ 12.30
EVENT AT TWO GALS	08/20/2025	$ 72.40
EVENT AT TWO GALS	08/20/2025	$ 389.48

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 3,904.89

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FROM PRESS AND PORTER	08/21/2025	$ 12.63
VIDEO PRODUCTION	08/25/2025	$ 250.00
OJ FOR CPD	08/29/2025	$ 68.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
LORI CLAY 104 WASHINGTON LANE SE CONCORD, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 3,904.89

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN BUTTONS	09/05/2025	$ 50.00
FLAGS FOR FAIR	09/05/2025	$ 101.64
FLOWERS FOR FAIR	09/06/2025	$ 80.77

4. Total only this Page	$ 1,037.22
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 4,244.89