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: Committee to Elect Chris Morgan

c. ID Number:

b. Mailing Address (include City, State and Zip Code):
Chris Morgan
818 Mt. Carmel Rd
Carthage, NC 28327
(Candidate)

Brenda Kimball
525 Scott Rd
Cameron, NC 28326
(Treasurer)

d. Date Filed: 5/10/2022

e. Phone Number: 910-391-2480

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	01/01/2022	04/30/2022	Brenda H. Kimball

6. Type of Committee (Check One)

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

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

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report: None

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	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name:

11. Account Information

a. Financial Institution Full Name: First Bank

b. Purpose: For All Campaign Expenses

c. Account Code: 1

d. Period Begin Balance: $ 747.00

11. 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 of Elections.

Printed Name of Signer	Signature of Appointed Treasurer	Date
Brenda H. Kimball	Brenda H Kimball	5/10/2022

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

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.

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: Committee to Elect Chris Morgan

c. ID Number:

b. Mailing Address (include City, State and Zip Code):
Chris Morgan
818 Mt. Carmel Rd
Carthage, NC 28327
(Candidate)

Brenda Kimball
525 Scott Rd
Cameron, NC 28326
(Treasurer)

d. Date Filed: 5/10/2022

e. Phone Number: 910-391-2480

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	01/01/2022	04/30/2022	Brenda H. Kimball

6. Type of Committee (Check One)

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

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

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report: None

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	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name:

11. Account Information

a. Financial Institution Full Name: First Bank

b. Purpose: For All Campaign Expenses

c. Account Code: 1

d. Period Begin Balance: $ 747.00

11. 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 of Elections.

Brenda H. Kimball	Brenda H Kimball	5/10/2022
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

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.

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: Committee to Elect Chris Morgan

c. ID Number:

b. Mailing Address (include City, State and Zip Code):
Chris Morgan
818 Mt. Carmel Rd
Carthage, NC 28327
(Candidate)

Brenda Kimball
525 Scott Rd
Cameron, NC 28326
(Treasurer)

d. Date Filed: 5/10/2022

e. Phone Number: 910-391-2480

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	01/01/2022	04/30/2022	Brenda H. Kimball

6. Type of Committee (Check One)

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

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

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report: None

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	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name:

11. Account Information

a. Financial Institution Full Name: First Bank

b. Purpose: For All Campaign Expenses

c. Account Code: 1

d. Period Begin Balance: $ 747.00

11. 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 of Elections.

Brenda H. Kimball	Brenda H Kimball	5/10/2022
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

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.
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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: Committee to Elect Chris Morgan

c. ID Number:

b. Mailing Address (include City, State and Zip Code):
Chris Morgan
818 Mt. Carmel Rd
Carthage, NC 28327
(Candidate)

Brenda Kimball
525 Scott Rd
Cameron, NC 28326
(Treasurer)

d. Date Filed: 5/10/2022

e. Phone Number: 910-391-2480

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	01/01/2022	04/30/2022	Brenda H. Kimball

6. Type of Committee (Check One)

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

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

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report: None

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	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name:

11. Account Information

a. Financial Institution Full Name: First Bank

b. Purpose: For All Campaign Expenses

c. Account Code: 1

d. Period Begin Balance: $ 747.00

11. 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 of Elections.

Brenda H. Kimball	Brenda H Kimball	5/10/2022
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	5/10/2022	Employee:	APB
Date Postmarked:		Employee:	
Date Scanned:		Employee:	
Date Data Entered:		Employee:	

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☒ Hand Delivered
- ☐ Electronically Filed
- ☐ Signer has not received mandatory training

RECEIVED MAY 10 2022

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.

MOORE BOE

Detailed Summary

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

Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Committee to Elect Chris Morgan	First Quarterly	

Start of Election Cycle: January 1, 2022		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 747.00	$ 747.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 345.00	$ 345.00
6) Contributions from Individuals	(CRO-1210)	$ 8,003.37	$ 8,003.37
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$	$
9) Loan Proceeds	(CRO-1410)	$	$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$	$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$	$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$	$
11c) Outside Sources of Income	(CRO-1250)	$	$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$	$
11e) Exempt Purchase Price Sales	(CRO-1265)	$	$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 8,348.37	$ 8,348.37
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 6,839.73	$ 6,839.73
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$
13c) Coordinated Party Expenditures	(CRO-1310)	$	$
14) Aggregated Non-Media Expenditures	(CRO-1315)	$	$
15) Loan Repayments	(CRO-1420)	$	$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$	$
17) In-Kind Contributions	(CRO-1510)	$ 1,253.37	$ 1,253.37
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 8,093.10	$ 8,093.10
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 1,002.27	$ 1,002.27
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$	
24) Account Transfers Within the Committee	(CRO-1720)	$	
25) Administrative Support	(CRO-1710)	$	$
26) Forgiven Loans	(CRO-1440)	$	$
27) 48-Hour Notice Reports Sum	(CRO-2220)	$	$
28) Contributions to be Refunded	(CRO-1215)	$	$

Aggregated Contributions from Individuals

Page 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 Chris Morgan	

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	1	Check		2/21/2022	$ 50.00
☐ Add ☐ Remove	1	cash		3/1/2022	$ 50.00
☐ Add ☐ Remove	1	cash		3/1/2022	$ 50.00
☐ Add ☐ Remove	1	cash		3/8/2022	$ 50.00
☐ Add ☐ Remove	1	cash		3/8/2022	$ 20.00
☐ Add ☐ Remove	1	Check		3/18/2022	$ 50.00
☐ Add ☐ Remove	1	Check		3/18/2022	$ 50.00
☐ Add ☐ Remove	1	Check		4/29/2022	$ 25.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$ 345.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 345.00

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 Chris Morgan	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Barney Hussey P.O. Box 157 Robbins, N.C. 27325	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 293.37

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Campaign Post Cards and Business Cards	02/08/2022	$ 213.37
		$
Ad in Robbins Express	04/08/2022	$ 80.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Yianni Kakouras 2172 NC-705 Seagrove, NC 27341	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 250.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Food for Meet and Greet/Campaign Kickoff	3/6/2022	$ 250.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Pete Kakouras 4088 US 15-501 Carthage, NC 28327	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 575.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Endorsement Ad for The Pilot	04/13/2022	$ 575.00
		$
		$

4. Total only this Page	$ 1,118.37
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$

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 Chris Morgan	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Chris Morgan 818 Mt. Carmel Rd Carthage, N.C. 28327	☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 2,500.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Stamps, Envelopes + Paper for	04/25/2022	$ 100.00
Campaign mailings		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Chris Morgan 818 Mt Carmel Rd Carthage, NC 28327	☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 2,535.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Damon Clark for Car Magnet	02/05/2022	$ 35.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

4. Total only this Page	$ 135.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 1,253.37

Contributions from Individuals

Pg 1 of 6

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 Chris Morgan	

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
Margaret Lorenz 17 Sunset Drive Whispering Pines, NC 28327	Attorney	Lorenz & Creed Law Firm, PLLC/ Public Law Firm		$ 1,000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		02/02/2022	$ 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
Joan McIver 832 Mount Carmel Rd Carthage, N.C. 28327	Retired			$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		02/07/2022	$ 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
Dana Costanza 155 Penn Carol Lane Southern Pines, NC 28387	Office Manager	Richard J. Costanza, P.A. Law Office/ Public Law Firm		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		02/22/2022	$ 500.00
☐					$
☐					$

4. Total only this Page	$ 2,000.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

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 Chris Morgan	

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
Amy Caviness 1841 Joel Rd Carthage, N.C. 28327	Retired			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		02/22/2022	$ 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
Chris Morgan 818 Mt. Carmel Rd Carthage, N.C. 28327	Deputy CSC	Moore County Clerk of Superior Court / Head Bookkeeper	Candidate	$2,400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		03/01/2022	$ 1,300.00
☐					$
☐					$

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
Diane Isom P.O. Box 1504 Carthage, NC 28327	Retired			$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		03/08/2022	$ 250.00
☐					$
☐					$

4. Total only this Page	$ 1,650.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

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 Chris Morgan	

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
Catherine Graham 399 Bingham St. Carthage, N.C. 28327	Retired Moore Co CSC/ Moore Co. Commissioner	Moore County Board of County Commissioners		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		03/08/2022	$ 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
Virginia B. Rolfe 55 St. Andrews Drive Pinehurst, N.C. 28374	Paralegal	Sandhills Law Group / Public Law Firm		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		03/21/2022	$ 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
Jody S. Foyles 19 Masters Ridge Southern Pines, NC 28387	Attorney	Foyles Law Firm, PLLC / Public Law Firm		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		03/18/2022	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 550.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Contributions from Individuals

Pg 4 of 6

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 Chris Morgan	

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
Ryan Wimmer 365 Willow Brook Dr Carthage, N.C. 28327	Individual Business Owner	Insurance Agent		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		03/21/2022	$ 300.00
☐					$
☐					$

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
Carol Parker 272 Ring Rd Carthage, N.C. 28327	Office Manager	Terrace Ridge Farms		$ 1,000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		03/21/2022	$ 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
Sara Jane Pate 370 Serpentine Dr Southern Pines, NC 28387	Retired			$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		04/05/2022	$ 150.00
☐					$
☐					$

4. Total only this Page	$ 1,450.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

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 Chris Morgan	

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 Daniel Pate 370 Serpentine Dr Southern Pines, N.C 28387	Retired Attorney			$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	check		04/05/2022	$ 150.00
☐					$
☐					$

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 Reid Oldham P.O. Box 147 Lakeview, NC 28350	Attorney	Crockett + Oldham, Attorneys, PLLC / Public Law Firm		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	check		04/29/2022	$ 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
Mickey R. Brown 260 W. Magnolia Dr P.O. Box 607 Robbins, NC 27325	Paralegal	Thigpen + Jenkins, LLP / Public Law Firm		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	check		04/26/2022	$ 250.00
☐					$
☐					$

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)*	$

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 Chris morgan	

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
Arnold Lassiter 577 Marley Rd Robbins, NC 27325	Retired			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		04/13/2022	$ 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
				$

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

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
				$

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

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)*	$ 6,750.00

Detailed Summary [CRO-1100]
Form Description

The **Detailed Summary** form provides a summary of all disclosure report forms (except for the **Account Transfers** form) and total monetary information for the current election cycle of the committee. This form should accompany all disclosure reports filed.

When a disclosure report is amended, all information on this form MUST be provided and check "Yes" at the top of the page.

Line-by-Line Instructions

LINE 1. Provide the complete name of the committee or fund this report covers.

LINE 2. Provide the type of report as indicated on Line 9 of the cover page.

LINE 3. Provide the ID number of the committee or fund.

LINE 4. List the Cash on Hand at the start of the **current reporting period**. This should always be the same figure listed as Cash on Hand at End of Reporting Period on the previous report. List the Cash on Hand at the start of the **election cycle**. The start of the election cycle will be January 1, in the year after the last election for the candidate's office, or January 1 of an odd numbered year if the committee is a party, PAC or referendum committee.

LINE 5. List the total sum of all Aggregated Contributions from Individuals. These are contributions from individuals who have given $50 or less for the election. This is equal to the sum listed on Line 5 of form CRO-1205.

LINE 6. List the total sum of all Contributions from Individuals. This is equal to the sum listed on Line 5 of form CRO-1210.

LINE 7. List the total sum of all Contributions from Political Party Committees. This is equal to the sum listed on Line 5 of form CRO-1220.

LINE 8. List the total sum of all Contributions from Other Political Committees. This is equal to the sum listed on Line 5 of form CRO-1230. These include contributions from PACs and candidate committees.

LINE 9. List the total sum of all Loan Proceeds. This is equal to the sum listed on Line 5 of form CRO-1410.

LINE 10. List the total sum of all Refunds and Reimbursements to the Committee. This is equal to the sum listed on Line 5 of form CRO-1240.

LINE 11. Other Receipt Sources

a. List the total sum of all interest accrued on bank accounts. This is equal to the sum listed on Line 6 of form CRO-1250.

b. List the total sum of all Contributions from Not-for-Profit Organizations. This is equal to the sum listed on Line 6 of form CRO-1250.

c. List the total sum of all other Outside Sources of Income. This is equal to the sum listed on Line 6 of form CRO-1250.

d. List the total sum of all Legal Expense Funds. This is equal to the sum listed on Line 5 of for CRO-1270.

e. List the total sum of all Party Executive Committee Exempt Purchase Price Sales. This is equal to the sum listed on Line 9 of form CRO-1265.

LINE 12. List the total sum of all receipts. Calculate this by adding lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e.

LINE 13. Disbursements

a. List the total sum of all Operating Expenditures. This is equal to the sum listed on Line 6 of form CRO-1310.

b. List the total sum of all Contributions to Candidates/Political Committees. This is equal to the sum listed on Line 6 of form CRO-1310.

c. List the total sum of all Coordinated Party Expenditures. This is equal to the sum listed on Line 6 of form CRO-1310.

LINE 14. List the total sum of all Aggregated Non-Media Expenditures. This is equal to the sum listed on Line 5 of form CRO-1315.

LINE 15. List the total sum of all Loan Repayments. This is equal to the sum listed on Line 5 of form CRO-1420.

LINE 16. List the total sum of all Refunds and Reimbursements from the Committee. This is equal to the sum listed on Line 5 of form CRO-1320.

LINE 17. List the total sum of all In-Kind Contributions. This is equal to the sum listed on Line 5 of form CRO-1510.

LINE 18. List the total sum of all Expenditures. Calculate this by adding Lines 13a-c, 14, 15, 16 and 17.

LINE 19. List the Cash on Hand at End of Reporting Period. For "This Period", calculate by adding Lines 4 and 12, then subtract Line 18. For "This Election Cycle", calculate by adding Lines 4 and 12, then subtract Line 18.

LINE 20. List the total sum of all Non-Monetary Gifts Given to Committees. This is equal to the sum listed on Line 5 of form CRO-1330.

LINE 21. List the total sum of all Outstanding Loans (including ones from other campaigns). This is equal to the sum listed on Line 5 of form CRO-1430.

LINE 22. List the total sum of all Debts and Obligations owed BY the Committee. This is equal to the sum listed on Line 5 of form CRO-1610.

LINE 23. List the total sum of all Debts and Obligations owed To the Committee. This is equal to the sum listed on Line 5 of form CRO-1620.

LINE 24. List the total sum of all the Account Transfers made within the Committee. This is equal to the sum listed on Line 5 of form CRO-1720.

LINE 25. List the total sum of the Parent Entity's Administrative Support. This is equal to the sum listed on Line 5 of form CRO-1710.

LINE 26. List the total sum of all the Forgiven Loans made to the committee. This is equal to the sum listed on Line 6 of form CRO-1440.

LINE 27. List the total sum of all the 48-Hour notices. This is equal to the sum listed on Line 4 of form CRO-2220.

LINE 28. List the total sum of all Contributions to be refunded. This is equal to the sum listed on line 5 of form CRO-1215.

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 Chris Morgan	

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
Daryl Jackson P.O. Box 611 Pinehurst, NC 28370		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 600.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	2/23/2022	$ 600.00	Billboard Rental
				$	

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
Damon Clark 4225 Murdocksville Rd West End, NC 27376		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 56.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	2/23/2022	$ 56.00	Retiree Board
				$	

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
Super Cheap Signs 9200 Waterford Centre Blvd #100 Austin, Texas 78758		☐ Federal ☒ County: ☐ State ☐ Municipality:		$2,984.99

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	A	2/10/2022	$ 1,542.00	Campaign Signs
1	Debit Card	A	3/25/2022	$ 1,442.99	Campaign Signs

5. Total only this Page	$ 3,640.99
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)*	$

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 Chris Morgan	

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)
Sticky Life
7868 Us Hwy 70
Bus West Unit D
Clayton, NC 27520

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 336.65

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	A	2/14/2022	$ 336.65	Magnetic Signs
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
Parish Sign + Service
627 Laurinburg Rd
Raeford, NC 28376

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 1,638.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	A	3/4/2022	$ 1,638.00	Billboard Cover
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
Compel Graphics + Printing
6896 Gray Oaks Dr
Theodore, AL 36582

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 433.68

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	A	4/15/2022	$ 433.68	Business Cards
				$	

5. Total only this Page	$ 2,408.33
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)*	$

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): Committee to Elect Chris Morgan

2. ID Number:

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):
Tractor Supply
5601 US Hwy 1
Vass, NC 28394

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 283.02

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	A	4/8/2022	$ 283.02	Posts for Signs
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
Super Cheap Signs
9200 Waterford Centre Blvd #100
Austin, Texas 78758

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 3,412.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	A	4/18/2022	$ 427.39	Campaign Signs
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
Mike Freidel
211 Suite E
Central Park Ave
Pinehurst, NC 28374

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	O	04/01/2022	$ 80.00	Fee for Meet & Greet
				$	

5. Total only this Page $ 790.41

6. Total of ALL CRO-1310 Pages $ 6,839.73

(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)

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)**