

# 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.

<b>1. Committee Information</b>			
a. Full Name		c. ID Number	
LYDIA FOR COUNCIL			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
35 MCMICHAEL DRIVE PINEHURST, NC 28374		10/25/2025	
		e. Phone Number (910) 255-3062	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	09/24/2025	10/20/2025	LYDIA BOESCH*
6. Type of Committee (Check One)		7. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Municipal <input type="checkbox"/> State/County <input type="checkbox"/> Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> First <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Pre-primary <input type="checkbox"/> Second <input type="checkbox"/> Final <input type="checkbox"/> Pre-election <input type="checkbox"/> Third <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Fourth <input type="checkbox"/> Annual <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Special <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			
<b>3. Account Information</b>		<b>3. Account Information</b>	
a. Financial Institution Full Name		a. Financial Institution Full Name	
FIRST BANK			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
DEPOSIT CAMPAIGN CONTRIBUTIONS AND PAY CAMPAIGN EXPENSES	1A		d. Period Begin Balance
	d. Period Begin Balance		
	\$ 5,933.45		
<b>CERTIFICATION</b>			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board			
<u>LYDIA BOESCH</u> Printed Name of Signer		<u>Lydia Boesch</u> Signature of Appointed Treasurer	
		10/25/2025 Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received:	Employee:	Delivery Method	
Date Postmarked:	Employee:	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Scanned:	Employee:		
Date Data Entered:	Employee:	<input type="checkbox"/> Signer has not received mandatory training	
<b>Please Note:</b> This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

## 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
LYDIA FOR COUNCIL	2025 Pre-Election	
Start of Election Cycle: January 1, 2025		Total this Reporting Period
4) Cash on Hand at Start		\$ 5,933.45 \$ 0.00
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 150.00 \$ 831.03
6) Contributions from Individuals	(CRO-1210)	\$ 6,109.49 \$ 32,286.21
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00 \$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00 \$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00 \$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00 \$ 0.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00 \$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00 \$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00 \$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00 \$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00 \$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 6,259.49 \$ 33,117.24
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 3,653.54 \$ 13,916.35
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)	\$ 87.37 \$ 157.79
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)	\$ 2,270.92 \$ 12,861.99
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 6,011.83 \$ 26,936.13
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 6,181.11 \$ 6,181.11
<b>ADDITIONAL INFORMATION</b>		
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-3230)	\$ 0.00 \$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00 \$ 0.00

**Aggregated Contributions from Individuals** Page 1 of 1

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

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
LYDIA FOR COUNCIL						
<b>3. Contributor Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	1A	Check		10/16/2025	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1A	Check		10/05/2025	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1A	Check		10/12/2025	\$	50.00
<input type="checkbox"/> Remove						
<b>4. Total only this Page</b>					\$	\$150.00
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$150.00

CRO-1205

NC State Board of Elections

April 2007

# Contributions from Individuals

Pg 1 of 9

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		
LYDIA FOR COUNCIL					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  THOMAS ADAMS 151 CREST ROAD SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b>  COUNTY COMMISSIONER	<b>d. Comments</b>  <b>e. Election Sum to Date</b>  \$ 100.00	
			<b>c. Employer's Name/Specific Field</b>  MOORE COUNTY		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1A	Check		10/20/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MARY BARRANTI 23 LASSWADE DRIVE PINEHURST, NC 28374			<b>b. Job Title/Profession</b>  I.T. MANAGER	<b>d. Comments</b>  <b>e. Election Sum to Date</b>  \$ 500.00	
			<b>c. Employer's Name/Specific Field</b>  U.S. ARMY RESERVE COMMAND		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1A	Check		10/12/2025	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702			<b>b. Job Title/Profession</b>  ATTORNEY	<b>d. Comments</b>  <b>e. Election Sum to Date</b>  \$ 11,449.99	
			<b>c. Employer's Name/Specific Field</b>  SELF-EMPLOYED		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1A	In-Kind	STAMPS FOR TOM BEDDOW FIRST MAILING	10/03/2025	\$ 156.00
<input type="checkbox"/>	1A	In-Kind	RACK CARD DESIGNED BY JIM NASH	10/03/2025	\$ 540.32
<input type="checkbox"/>	1A	In-Kind	FACEBOOK ADVERTISING 9/26 - 10/6	10/06/2025	\$ 125.00
<b>4. Total only this Page</b> \$ 1,421.32					
<b>5. Total of ALL CRO-1210 Pages</b> \$ 6,109.49 <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					

# Contributions from Individuals

Pg 2 of 9

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
LYDIA FOR COUNCIL			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702		<b>b. Job Title/Profession</b>  ATTORNEY	<b>d. Comments</b>
		<b>c. Employer's Name/Specific Field</b>  SELF-EMPLOYED	<b>e. Election Sum to Date</b>  \$ 11,449.99
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>
<input type="checkbox"/>	1A	In-Kind	STAMPS FOR TOM BEDDOW SECOND
<input type="checkbox"/>	1A	In-Kind	FACEBOOK ADVERTISING 10/7 - 10/19
<input type="checkbox"/>			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOHN C BOESCH 35 MCMICHAEL DRIVE PINEHURST, NC 28374		<b>b. Job Title/Profession</b>  NO JOB TITLE	<b>d. Comments</b>
		<b>c. Employer's Name/Specific Field</b>  NOT EMPLOYED	<b>e. Election Sum to Date</b>  \$ 52.05
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>
<input type="checkbox"/>	1A	Credit Card	
<input type="checkbox"/>			
<input type="checkbox"/>			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ELAINE BOLOGNA 91 ABBOTTSFORD DRIVE PINEHURST, NC 28374		<b>b. Job Title/Profession</b>  NO JOB TITLE	<b>d. Comments</b>
		<b>c. Employer's Name/Specific Field</b>  NOT EMPLOYED	<b>e. Election Sum to Date</b>  \$ 650.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>
<input type="checkbox"/>	1A	In-Kind	FOOD, BEVERAGES, SUPPLIES FOR MG
<input type="checkbox"/>			
<input type="checkbox"/>			
<b>4. Total only this Page</b> \$ 851.65			
<b>5. Total of ALL CRO-1210 Pages</b> \$ 6,109.49 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>			

# Contributions from Individuals

PG 3 of 9

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> LYDIA FOR COUNCIL		<b>2. ID Number</b>											
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MIRIAM S CHU 120 HARVEST LANE CARTHAGE, NC 23827</td> <td><b>b. Job Title/Profession</b> ARTIST</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED</td> <td colspan="2"><b>e. Election Sum to Date</b> \$ 520.51</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MIRIAM S CHU 120 HARVEST LANE CARTHAGE, NC 23827	<b>b. Job Title/Profession</b> ARTIST	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED	<b>e. Election Sum to Date</b> \$ 520.51			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MIRIAM S CHU 120 HARVEST LANE CARTHAGE, NC 23827	<b>b. Job Title/Profession</b> ARTIST	<b>d. Comments</b>											
	<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED	<b>e. Election Sum to Date</b> \$ 520.51											
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>								
<input type="checkbox"/>	1A	Credit Card		10/15/2025	\$ 520.51								
<input type="checkbox"/>					\$								
<input type="checkbox"/>					\$								
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MARY FLYNN 137 LARK DRIVE WEST END, NC 27376</td> <td><b>b. Job Title/Profession</b> NO JOB TITLE</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> NOT EMPLOYED</td> <td colspan="2"><b>e. Election Sum to Date</b> \$ 100.00</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MARY FLYNN 137 LARK DRIVE WEST END, NC 27376	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED	<b>e. Election Sum to Date</b> \$ 100.00		<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MARY FLYNN 137 LARK DRIVE WEST END, NC 27376	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>											
	<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED	<b>e. Election Sum to Date</b> \$ 100.00											
<input type="checkbox"/>	1A	Check		10/12/2025	\$ 100.00								
<input type="checkbox"/>					\$								
<input type="checkbox"/>					\$								
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JULIA FORSYTHE 29 MCMICHAEL DRIVE PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> LIBRARY ASSISTANT</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> VILLAGE OF PINEHURST</td> <td colspan="2"><b>e. Election Sum to Date</b> \$ 104.10</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JULIA FORSYTHE 29 MCMICHAEL DRIVE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> LIBRARY ASSISTANT	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> VILLAGE OF PINEHURST	<b>e. Election Sum to Date</b> \$ 104.10		<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JULIA FORSYTHE 29 MCMICHAEL DRIVE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> LIBRARY ASSISTANT	<b>d. Comments</b>											
	<b>c. Employer's Name/Specific Field</b> VILLAGE OF PINEHURST	<b>e. Election Sum to Date</b> \$ 104.10											
<input type="checkbox"/>	1A	Credit Card		10/03/2025	\$ 104.10								
<input type="checkbox"/>					\$								
<input type="checkbox"/>					\$								
<b>4. Total only this Page</b>				\$ 724.61									
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ 6,109.49									

# Contributions from Individuals

PG 4 of 9

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> LYDIA FOR COUNCIL				<b>2. ID Number</b>												
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  CAL FULCHER 32 KILBERRY DR PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> NO JOB TITLE</td> <td colspan="3" rowspan="2"><b>d. Comments</b></td> </tr> <tr> <td><b>c. Employer's Name/Specific Field</b> NOT EMPLOYED</td> </tr> <tr> <td></td> <td></td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 75.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  CAL FULCHER 32 KILBERRY DR PINEHURST, NC 28374	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED			<b>e. Election Sum to Date</b> \$ 75.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  CAL FULCHER 32 KILBERRY DR PINEHURST, NC 28374	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>														
	<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED															
		<b>e. Election Sum to Date</b> \$ 75.00														
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>											
<input type="checkbox"/>	1A	Check		10/10/2025	\$ 75.00											
<input type="checkbox"/>					\$											
<input type="checkbox"/>					\$											
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RALPH HENDRIX 13 OXTON CIRCLE PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> EYE CARE</td> <td colspan="3" rowspan="2"><b>d. Comments</b></td> </tr> <tr> <td><b>c. Employer's Name/Specific Field</b> SELF</td> </tr> <tr> <td></td> <td></td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 100.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RALPH HENDRIX 13 OXTON CIRCLE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> EYE CARE	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> SELF			<b>e. Election Sum to Date</b> \$ 100.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RALPH HENDRIX 13 OXTON CIRCLE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> EYE CARE	<b>d. Comments</b>														
	<b>c. Employer's Name/Specific Field</b> SELF															
		<b>e. Election Sum to Date</b> \$ 100.00														
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>											
<input type="checkbox"/>	1A	Check		10/13/2025	\$ 100.00											
<input type="checkbox"/>					\$											
<input type="checkbox"/>					\$											
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JAMES W LEXO JR 15 BEL AIR PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> NO JOB TITLE</td> <td colspan="3" rowspan="2"><b>d. Comments</b></td> </tr> <tr> <td><b>c. Employer's Name/Specific Field</b> NOT EMPLOYED</td> </tr> <tr> <td></td> <td></td> <td colspan="3"><b>e. Election Sum to Date</b> \$ 500.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JAMES W LEXO JR 15 BEL AIR PINEHURST, NC 28374	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED			<b>e. Election Sum to Date</b> \$ 500.00		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JAMES W LEXO JR 15 BEL AIR PINEHURST, NC 28374	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>														
	<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED															
		<b>e. Election Sum to Date</b> \$ 500.00														
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>											
<input type="checkbox"/>	1A	In-Kind	FOOD, BEVERAGES, AND SUPPLIES FOR M&G	10/15/2025	\$ 250.00											
<input type="checkbox"/>					\$											
<input type="checkbox"/>					\$											
<b>4. Total only this Page</b>					\$ 425.00											
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6,109.49											

# Contributions from Individuals

Pg 5 of 9

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			
LYDIA FOR COUNCIL					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
			NO JOB TITLE		
GERALD MALPASS 14 HOBKIRK COURT PINEHURST, NC 28374			c. Employer's Name/Specific Field	e. Election Sum to Date	
			NOT EMPLOYED	\$ 156.15	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1A	Credit Card		09/30/2025	\$ 156.15
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
			STATE SENATOR		
TOM MCINNIS 60 LAKE FOREST DRIVE SW PINEHURST, NC 28374			c. Employer's Name/Specific Field	e. Election Sum to Date	
			STATE OF NORTH CAROLINA	\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1A	Check		10/12/2025	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
			REAL ESTATE DEVELOPMENT		
MARTY MCKENZIE PO BOX 1553 PINEHURST, NC 28370			c. Employer's Name/Specific Field	e. Election Sum to Date	
			SELF	\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1A	In-Kind	FOOD, BEVERAGES, AND SUPPLIES FOR RALLY	10/12/2025	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 606.15
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6,109.49

# Contributions from Individuals

Pg 6 of 9

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> LYDIA FOR COUNCIL		<b>2. ID Number</b>									
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBERT MIRMAN 45 PINE VALLEY ROAD PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> CEO</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> ELIANT</td> <td></td> </tr> <tr> <td></td> <td></td> <td><b>e. Election Sum to Date</b> \$ 100.00</td> </tr> </table>			<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBERT MIRMAN 45 PINE VALLEY ROAD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> ELIANT				<b>e. Election Sum to Date</b> \$ 100.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBERT MIRMAN 45 PINE VALLEY ROAD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>									
	<b>c. Employer's Name/Specific Field</b> ELIANT										
		<b>e. Election Sum to Date</b> \$ 100.00									
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>						
<input type="checkbox"/>	1A	Check		10/17/2025	\$ 100.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JEFFREY S MORGAN 28 KILBRIDE DRIVE PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> SURGEON</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> VETERANS HEALTH ADMINISTRATION</td> <td></td> </tr> <tr> <td></td> <td></td> <td><b>e. Election Sum to Date</b> \$ 650.00</td> </tr> </table>			<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JEFFREY S MORGAN 28 KILBRIDE DRIVE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> SURGEON	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> VETERANS HEALTH ADMINISTRATION				<b>e. Election Sum to Date</b> \$ 650.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JEFFREY S MORGAN 28 KILBRIDE DRIVE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> SURGEON	<b>d. Comments</b>									
	<b>c. Employer's Name/Specific Field</b> VETERANS HEALTH ADMINISTRATION										
		<b>e. Election Sum to Date</b> \$ 650.00									
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>						
<input type="checkbox"/>	1A	In-Kind	FOOD, BEVERAGES, AND SUPPLIES FOR M&G	10/20/2025	\$ 150.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JAMES R NASH 5 OXTON CIRCLE PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> RETAIL OWNER</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> DUNE HOLDINGS GROUP</td> <td></td> </tr> <tr> <td></td> <td></td> <td><b>e. Election Sum to Date</b> \$ 572.56</td> </tr> </table>			<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JAMES R NASH 5 OXTON CIRCLE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> RETAIL OWNER	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> DUNE HOLDINGS GROUP				<b>e. Election Sum to Date</b> \$ 572.56
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JAMES R NASH 5 OXTON CIRCLE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> RETAIL OWNER	<b>d. Comments</b>									
	<b>c. Employer's Name/Specific Field</b> DUNE HOLDINGS GROUP										
		<b>e. Election Sum to Date</b> \$ 572.56									
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>						
<input type="checkbox"/>	1A	Credit Card		10/03/2025	\$ 572.56						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
<b>4. Total only this Page</b>					\$ 822.56						
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6,109.49						

# Contributions from Individuals

Pg 7 of 9

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> LYDIA FOR COUNCIL		<b>2. ID Number</b>													
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RICHARD NORLAND 100 LAKE SHORE DRIVE D PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b>  DIRECTOR OF SALES</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b>  NORLAND PRODUCTS INC.</td> <td colspan="2"></td> </tr> <tr> <td></td> <td></td> <td colspan="2"><b>e. Election Sum to Date</b>  \$ 104.10</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RICHARD NORLAND 100 LAKE SHORE DRIVE D PINEHURST, NC 28374	<b>b. Job Title/Profession</b>  DIRECTOR OF SALES	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b>  NORLAND PRODUCTS INC.					<b>e. Election Sum to Date</b>  \$ 104.10	
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RICHARD NORLAND 100 LAKE SHORE DRIVE D PINEHURST, NC 28374	<b>b. Job Title/Profession</b>  DIRECTOR OF SALES	<b>d. Comments</b>													
	<b>c. Employer's Name/Specific Field</b>  NORLAND PRODUCTS INC.														
		<b>e. Election Sum to Date</b>  \$ 104.10													
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>												
<input type="checkbox"/>	1A	Credit Card													
<input type="checkbox"/>															
<input type="checkbox"/>															
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA BOLES PARKE 240 FAIRWAY DR PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b>  NO JOB TITLE</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b>  NOT EMPLOYED</td> <td colspan="2"></td> </tr> <tr> <td></td> <td></td> <td colspan="2"><b>e. Election Sum to Date</b>  \$ 100.00</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA BOLES PARKE 240 FAIRWAY DR PINEHURST, NC 28374	<b>b. Job Title/Profession</b>  NO JOB TITLE	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b>  NOT EMPLOYED					<b>e. Election Sum to Date</b>  \$ 100.00	
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA BOLES PARKE 240 FAIRWAY DR PINEHURST, NC 28374	<b>b. Job Title/Profession</b>  NO JOB TITLE	<b>d. Comments</b>													
	<b>c. Employer's Name/Specific Field</b>  NOT EMPLOYED														
		<b>e. Election Sum to Date</b>  \$ 100.00													
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>												
<input type="checkbox"/>	1A	Check													
<input type="checkbox"/>															
<input type="checkbox"/>															
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOSH RICHARDSON 3801 US HIGHWAY 1 VASS, NC 28394</td> <td><b>b. Job Title/Profession</b>  CEO</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b>  GENTLE RENEW</td> <td colspan="2"></td> </tr> <tr> <td></td> <td></td> <td colspan="2"><b>e. Election Sum to Date</b>  \$ 500.00</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOSH RICHARDSON 3801 US HIGHWAY 1 VASS, NC 28394	<b>b. Job Title/Profession</b>  CEO	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b>  GENTLE RENEW					<b>e. Election Sum to Date</b>  \$ 500.00	
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOSH RICHARDSON 3801 US HIGHWAY 1 VASS, NC 28394	<b>b. Job Title/Profession</b>  CEO	<b>d. Comments</b>													
	<b>c. Employer's Name/Specific Field</b>  GENTLE RENEW														
		<b>e. Election Sum to Date</b>  \$ 500.00													
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>												
<input type="checkbox"/>	1A	Credit Card													
<input type="checkbox"/>															
<input type="checkbox"/>															
<b>4. Total only this Page</b> \$ 704.10															
<b>5. Total of ALL CRO-1210 Pages</b> \$ 6,109.49 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>															

# Contributions from Individuals

Pg 8 of 9

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>			
LYDIA FOR COUNCIL					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LANCE L SMITH 15 KILBRIDE DRIVE PINEHURST, NC 28374		<b>b. Job Title/Profession</b>  NO JOB TITLE	<b>d. Comments</b>  NOT EMPLOYED		
			<b>e. Election Sum to Date</b>  \$ 250.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1A	Check		10/20/2025	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  TIMOTHY SYKORA NC		<b>b. Job Title/Profession</b>  NO JOB TITLE	<b>d. Comments</b>  NOT EMPLOYED		
			<b>e. Election Sum to Date</b>  \$ 100.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1A	Check		10/20/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  PAULI LOHSE WELLS 250 FRYE ROAD PINEHURST, NC 28374		<b>b. Job Title/Profession</b>  NO JOB TITLE	<b>d. Comments</b>  NOT EMPLOYED		
			<b>e. Election Sum to Date</b>  \$ 200.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1A	Check		10/08/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b> \$ 450.00					
<b>5. Total of ALL CRO-1210 Pages</b> \$ 6,109.49 <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					

**Contributions from Individuals**Pg 9 of 9
 Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> LYDIA FOR COUNCIL		<b>2. ID Number</b>																														
<b>3. Contributor Information</b> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Add <input type="checkbox"/> Remove         </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;"><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  STEPHEN WOODWARD 180 LINDEN RD PINEHURST, NC 28374</td> <td style="width: 33%; padding: 5px;"><b>b. Job Title/Profession</b> NO JOB TITLE</td> <td style="width: 33%; padding: 5px;"><b>d. Comments</b></td> </tr> <tr> <td colspan="2" style="padding: 5px;"><b>c. Employer's Name/Specific Field</b> NOT EMPLOYED</td> <td style="padding: 5px;"><b>e. Election Sum to Date</b> \$ 130.13</td> </tr> <tr> <td><b>f. Prior</b></td> <td><b>g. Account Code</b></td> <td><b>h. Form of Payment</b></td> <td><b>i. In-Kind Description</b></td> <td><b>j. Date (mm/dd/yyyy)</b></td> <td><b>k. Amount</b></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>1A</td> <td>Credit Card</td> <td></td> <td>09/06/2025</td> <td>\$ 26.03</td> </tr> <tr> <td><input type="checkbox"/></td> <td>1A</td> <td>Credit Card</td> <td></td> <td>10/15/2025</td> <td>\$ 104.10</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </table>			<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  STEPHEN WOODWARD 180 LINDEN RD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>	<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED		<b>e. Election Sum to Date</b> \$ 130.13	<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	<input checked="" type="checkbox"/>	1A	Credit Card		09/06/2025	\$ 26.03	<input type="checkbox"/>	1A	Credit Card		10/15/2025	\$ 104.10	<input type="checkbox"/>					\$
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  STEPHEN WOODWARD 180 LINDEN RD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> NO JOB TITLE	<b>d. Comments</b>																														
<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED		<b>e. Election Sum to Date</b> \$ 130.13																														
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>																											
<input checked="" type="checkbox"/>	1A	Credit Card		09/06/2025	\$ 26.03																											
<input type="checkbox"/>	1A	Credit Card		10/15/2025	\$ 104.10																											
<input type="checkbox"/>					\$																											
<b>4. Total only this Page</b>			\$ 104.10																													
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>			\$ 6,109.49																													

CRO-1210

NC State Board of Elections

April 2007

# Disbursements

Pg 1 of 1  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>			
LYDIA FOR COUNCIL					
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> SPECTRUM REACH 6501 WESTON PARKWAY CARY, NC 27513		<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$ 2,128.40		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>		
1A	Check	A	10/10/2025		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> THE VILLAGE PRINTERS PO BOX 2139 PINEHURST, NC 28374		<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$ 1,360.80		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>		
1A	Check	B	10/10/2025		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> WEEB BROADCASTING STATION PO BOX 1855 SOUTHERN PINES, NC 28388		<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$ 740.00		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>		
1A	Check	A	10/08/2025		
<b>5. Total only this Page</b> \$ 3,653.54					
<b>6. Total of ALL CRO-1310 Pages</b> <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> \$ 3,653.54					
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h) above)</i>					
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		
<b>O* Other</b> <i>* Codes require detailed explanation in required remarks field (k)</i>					

# Aggregated Non-Media Expenditures

Page 1 of 1

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

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
LYDIA FOR COUNCIL						
<b>3. Payee Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. Purpose Code</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	<b>g. Required Remarks</b>
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1A	Draft	O	09/25/2025	\$ 4.10	CREDIT CARD FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1A	Draft	O	10/05/2025	\$ 6.15	CREDIT CARD FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1A	Draft	O	10/06/2025	\$ 4.10	CREDIT CARD FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1A	Draft	O	10/06/2025	\$ 22.56	CREDIT CARD FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1A	Draft	O	10/15/2025	\$ 46.36	CREDIT CARD FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1A	Draft	O	10/20/2025	\$ 4.10	CREDIT CARD FEE
<b>4. Total only this Page</b>					\$	87.37
<b>5. Total of ALL CRO-1315 Pages</b> <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	87.37
<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>						
E - Salaries		B* - Printing	C* - Fundraising	D - To Another Candidate		
I - Postage		F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
O* - Other		J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

## In-Kind Contributions

Pg 1 of 2

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

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

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>
LYDIA FOR COUNCIL		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702		<b>b. Type of Contributor</b> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source
		<b>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 11,449.99
<b>e. Description</b> STAMPS FOR TOM BEDDOW FIRST MAILING		<b>f. Date (mm/dd/yyyy)</b> 10/03/2025 <b>g. Fair Market Amount</b> \$ 156.00
RACK CARD DESIGNED BY JIM NASH		10/03/2025 \$ 540.32
FACEBOOK ADVERTISING 9/26 - 10/6		10/06/2025 \$ 125.00
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702		<b>b. Type of Contributor</b> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source
		<b>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 11,449.99
<b>e. Description</b> STAMPS FOR TOM BEDDOW SECOND MAILING		<b>f. Date (mm/dd/yyyy)</b> 10/09/2025 <b>g. Fair Market Amount</b> \$ 288.60
FACEBOOK ADVERTISING 10/7 - 10/19		10/19/2025 \$ 361.00
		\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ELAINE BOLOGNA 91 ABBOTTSFORD DRIVE PINEHURST, NC 28374		<b>b. Type of Contributor</b> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source
		<b>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 650.00
<b>e. Description</b> FOOD, BEVERAGES, SUPPLIES FOR MG		<b>f. Date (mm/dd/yyyy)</b> 10/20/2025 <b>g. Fair Market Amount</b> \$ 150.00
		\$
		\$
<b>4. Total only this Page</b> \$ 1,620.92		
<b>5. Total of ALL CRO-1510 Pages</b> \$ 2,270.92 <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		

## In-Kind Contributions

PG 2 of 2  Yes  No

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

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
LYDIA FOR COUNCIL			
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
JAMES W LEXO JR 15 BEL AIR PINEHURST, NC 28374		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	500.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD, BEVERAGES, AND SUPPLIES FOR M&G		10/15/2025	\$ 250.00
			\$
			\$
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
MARTY MCKENZIE PO BOX 1553 PINEHURST, NC 28370		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	250.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD, BEVERAGES, AND SUPPLIES FOR RALLY		10/12/2025	\$ 250.00
			\$
			\$
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
JEFFREY S MORGAN 28 KILBRIDE DRIVE PINEHURST, NC 28374		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	650.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD, BEVERAGES, AND SUPPLIES FOR M&G		10/20/2025	\$ 150.00
			\$
			\$
4. Total only this Page		\$	650.00
5. Total of ALL CRO-1510 Pages		\$	2,270.90
(This line must be on line 17 of Detailed Summary Page CRO-1100)			