Amendment	
Yes	✓ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms

1. Committee Information					
a. Full Name			c. ID Number		
The Committee to Elect Mike Woodard					
1 100	0.13		d. Date Filed		
b. Mailing Address (include City, State and Zip	Code)				
732 9th St Durham, NC 27705-4803			10/02/2023		
Dulliam, NC 27703-4003			e. Phone Number		
2. Report Year 3, Period Start Date (mm/dd/y	y) 4. Period End D	ate (mm/dd/yyyy)	5, Treasurer Full Name		
2023 08/30/2023		5/2023	Ronald B Richardson		
6. Type of Committee (Check one)	9. Type of Report (ch	eck only one type of	of report from one category)		
	Municipal	State/County	Referendum		
Candidate Campaign Party	Organizational	Organizatio	nal Organizational		
PAC Referendum	Thirty-five day	Quarterly	Pre-referendum		
Independent Expenditure Joint Fundraiser	✓ Pre-primary	First	— 		
Legal Expense Fund	Pre-election	Second	Supplemental Final		
	Pre-runoff	Third	☐ Annual		
7. Type of Fund (if applicable, check one)	Semi-annual	Fourth	Special		
☐"Booster Fund"	Mid Year	Semi-annu			
Building Fund	Year End	Mid Yea	10. Special Report Name		
_	Final	Year En			
✓ Other: NC Candidates Financing Fund	Special	Final	~		
8. Number of Fundraisers this Report	[_lobecial	Special			
2					
11. Account Information					
a. Financial Institution Full Name					
Pinnacle (formerly Bank of North Carolina)	MAIL				
b. Purpose		c. Account Code			
Campaign Checking Account	001 0 3 2027	002			
Campaign Checking Account ULT 3 7023 002					
dampaign oncoming recount	MG1 - 10 /11/3				
Campaign Chocking Account	DURHAM BOE	d. Period Begin B	alance		
Campaign Chooking Account	7112.1	d. Period Begin B	alance		
	7112.1		alance		
CERTIFICATION I certify that the Committee or Fund is in complian	DURHAM BOE	\$ 0.00	A, 22B & 22D-22M of Chapter		
CERTIFICATION I certify that the Committee or Fund is in compliar 163 of the NC General Statutes and that no funds	DURHAM BOE nce with all applicable pros are commindled with pros	\$ 0.00 visions of Article 22/	A, 22B & 22D-22M of Chapter isclosed funds. I further certify		
CERTIFICATION I certify that the Committee or Fund is in compliar 163 of the NC General Statutes and that no funds that this report is complete, true and correct and	DURHAM BOE nce with all applicable pros are commindled with pros	\$ 0.00 visions of Article 22/	A, 22B & 22D-22M of Chapter isclosed funds. I further certify		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report, is complete, true and correct and the c	DURHAM BOE nce with all applicable pross are commingled with prothat I have been trained by	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report, is complete, true and correct and the c	DURHAM BOE nce with all applicable pros are commindled with pros	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. 10. 2. 27 Date		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report is complete, true and correct and the cor	DURHAM BOE nce with all applicable prossure commingled with prothat I have been trained by Signature of Appoin	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. 10, 2, 27 Date Delivery Method		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report, is complete, true and correct and the c	DURHAM BOE nce with all applicable pross are commingled with prothat I have been trained by	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. 10, 2, 27 Date Delivery Method Normal Mail		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report is complete, true and correct and the fund of the fun	DURHAM BOE nce with all applicable prossure commingled with prothat I have been trained by Signature of Appoin	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. Date Delivery Method Normal Mail Registered Mail		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report, is complete, true and correct and the co	DURHAM BOE nce with all applicable pross are commingled with prothat I have been trained by Signature of Appoint Employee:	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. 10, 2, 27 Date Delivery Method Normal Mail		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report is complete, true and correct and the cor	DURHAM BOE nce with all applicable pross are commingled with prothat I have been trained b Signature of Appoin	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. Date Delivery Method Normal Mail Registered Mail		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report, is complete, true and correct and the c	DURHAM BOE nce with all applicable pross are commingled with prothat I have been trained by Signature of Appoint Employee:	\$ 0.00 visions of Article 22/ ohibited or other und y the NC State Boar	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. Date Delivery Method Normal Mail Registered Mail Hand Delivered		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report is complete, true and correct and the fund of the Name of Signer FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form cannot be used to a	DURHAM BOE nce with all applicable proses are commingled with protect that I have been trained by Signature of Appoint Employee: Employee: Employee: Employee:	\$ 0.00 visions of Article 22/ phibited or other und by the NC State Boar nted Treasurer All All All All All All All	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. Date Delivery Method		
CERTIFICATION I certify that the Committee or Fund is in compliant 163 of the NC General Statutes and that no funds that this report is complete, true and correct and the fund of the NC General Statutes and that no funds that this report is complete, true and correct and the fund of the fund o	DURHAM BOE Ince with all applicable prosser commingled with proster that I have been trained by Signature of Appoint Employee: Employee: Employee: Employee: Employee: Employee:	\$ 0.00 visions of Article 22/ phibited or other und by the NC State Boar atted Treasurer Attended Treasurer	A, 22B & 22D-22M of Chapter isclosed funds. I further certify d of Elections. Date Delivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training mmitee address, treasurer, ant information.		

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
The Committee to Elect Mike Woodard		2023 Pre-Primary	
Start of Election Cycle: January 1,2022		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$12,371.41	\$0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$865.00	\$1,545.00
6) Contributions from Individuals	(CRO-1210)	\$31,816.04	\$46,036.04
7) Contributions from Political Party Committees	(CRO-1220)	\$1,050.00	\$1,050.00
B) Contributions from Other Political Committees	(CRO-1230)	\$6,400.00	\$8,400.00
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)	\$40,131.04	\$57,031.04
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$40,965.61	\$45,464.20
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)	\$0.00	\$30.00
15) Loan Repayments	(CRO-1420)	\$0.00	\$0.00
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$1,108.04	\$1,108.04
17) In-Kind Contributions	(CRO-1510)	\$1,168.04	\$1,168.04
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16	and 17)	\$43,241.69	\$47,770.28
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract	\$9,260.76	\$9,260.76
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	ME STEEL NO THE
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
	to Poord of Elections		August 2009

CRO-1100 NC State Board of Elections August 2008



OCT 0 3 7073

	full Name (and Fund if	Contributions From	Individuals of \$50 of 1	2. ID Numb	ner
Control of the Contro	ttee to Elect Mike V	3.7			
Contribut	or Information		A STATE OF THE SAIL		
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mm/dd/yyyy)	f. Amount
Add Remove	002	Credit Card		08/30/2023	\$50.00
Add Remove	002	Credit Card		09/25/2023	\$50.00
Add Remove	002	Check		09/08/2023	\$50.00
Add Remove	002	Credit Card		09/07/2023	\$50.00
Add Remove	002	Credit Card		09/18/2023	\$25.00
Add Remove	002	Credit Card		09/19/2023	\$25.00
Add Remove	002	Check		09/21/2023	\$50.00
Add Remove	002	Credit Card		09/22/2023	\$25.00
Add Remove	002	Check	W A A 11	09/08/2023	\$25.00
Add Remove	002	Check	OCT 0 3 2027	09/13/2023	\$50.00
Add Remove	002	Credit Card	DURHAM BOE	09/17/2023	\$25.00
Add Remove	002	Check		08/30/2023	\$10.00
Add Remove	002	Check		09/13/2023	\$50.00
Add Remove	002	In-Kind	Food for event	09/10/2023	\$30,00
Add Remove	002	Check		09/21/2023	\$25.00
4 Total on	ly this Page		3 - 3 tr (3 - 7)		\$540.00

Aggregate	ed Contribution	s from Individua	l S Page	4 of 47	dment ∕es ✓ No
Optional forn	n used to report NC	Contributions From	Individuals of \$50 or I		- E 140
1. Committee F	Full Name (and Fund if	applicable)		2. ID Numi	oer
The Commi	ttee to Elect Mike V	Voodard			
3. Contribut	tor Information				
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mm/dd/yyyy)	f. Amount
Add Remove	002	Check		09/21/2023	\$50.00
Add Remove	002	Credit Card		09/18/2023	\$50.00
Add Remove	002	Check		09/25/2023	\$50.00
Add Remove	002	Check		09/13/2023	\$25.00
Add Remove	002	Credit Card		09/24/2023	\$50.00
Add Remove	002	Credit Card		09/07/2023	\$50.00
Add	002	Credit Card		09/06/2023	\$50.00

Remove

MAIL
OCT 0 3 2023
DURHAM BOE

4. Total only this Page	\$325.00
5. Total of ALL CRO-1205 Pages	\$865.00
(This line must be on line 5 of Detailed Summary Page CRO-1100)	

	The state of the s		Page5 of4 or contributions under \$50 if form CR		nent No
1. Comm	ittee Full Name (and F	und if applicable)		2. ID N	umber
The Com	mittee to Elect Mike Wo	odard			
3. Contr	ibutor Information	□ A	dd Remove		
a. Full Na	nme, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(inclue	le city, state, & zip)		Software Engineer		
	hane Allen				
	rcolor Way NC 27713-6917	10	c. Employer's Name/Specific Field		
l			Applied Materials	e. Election Sun	n to Date
					\$250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/15/2023	\$250.00
3. Contr	ibutor Information	ПА	dd Remove		NE THE
a. Full Na	ime, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(inclue	le city, state, & zip)		Director		
Amanda					
3225 Pick Durham.	kett Rd NC 27705-6009		c. Employer's Name/Specific Field		
Dannam,			HSUS	e. Election Sum to Date	
				e. Liection Sui	\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		08/30/2023	\$100.00
3 Centr	ibutor Information	ПА	dd Remove		A SUFFERENCE
	ame, Mailing Address	& Phone / A	b. Job Title/Profession	d. Comments	
(includ	de city, state, & zip)	1917 111	Not Employed		
Philip J. A	Azar	OCT 03 2023			
	mouth Ave NC 27701-1707	* ***	c. Employer's Name/Specific Field		
Jamain		DURHAM BOR	Not Employed	e. Election Sun	n to Data
				er Figerion 300	\$249.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount

4. Total only this page	\$599.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

09/19/2023

\$249.00

002

Credit Card

1. Commi	ittee Full Name (and I	Fund if applicable)		2. ID N	lumber
The Comr	mittee to Elect Mike Wo	oodard			
3. Contr	ibutor Information		Add Remove		
a, Full Na	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	le city, state, & zip)		Lawyer		
Sherrod E					
1125 Che Durham, I	erob Ln NC 27713-7335		c. Employer's Name/Specific Field		
ŕ			The Banks Law Firm	e. Election Sur	m to Date
				C. Elizaron Gui	\$250.00
f. Prior	g. Account Code	h. Form of Paymer	nt i. In-Kind Description	j. Date	k. Amount
П	002	Credit Card		09/20/2023	\$250.00
M. Lee Ba			President	-	
Durham,	NC 27705-2322		c. Employer's Name/Specific Field M.M. Fowler Inc.	e. Election Sur	
Durham,		h. Form of Paymei	M.M. Fowler Inc.	e. Election Sur	\$5,000.00
	g. Account Code	h. Form of Paymer	M.M. Fowler Inc.		\$5,000.00
f. Prior	g. Account Code	Check	M.M. Fowler Inc. nt i. In-Kind Description	e. Election Sur	\$5,000.00
f. Prior	g. Account Code	Check	M.M. Fowler Inc. i. In-Kind Description	e. Election Sur	\$5,000.00
f. Prior 3. Contr a. Full Na	g. Account Code 002 ributor Information	Check	M.M. Fowler Inc. nt i. In-Kind Description Add Remove	j. Date 09/05/2023	\$5,000.00
3. Contra. Full Na (inclue)	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) a G. Baxter	Check	M.M. Fowler Inc. i. In-Kind Description Add Remove b. Job Title/Profession Professor	j. Date 09/05/2023 d. Comments	\$5,000.00
3. Contra. Full Na (inclue) Lawrence	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) a G. Baxter	Check	M.M. Fowler Inc. i. In-Kind Description Add Remove b. Job Title/Profession Professor c. Employer's Name/Specific Field	j. Date 09/05/2023 d. Comments	\$5,000.00
3. Contra. Full Na (inclue) Lawrence	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) a G. Baxter mer St	Check	M.M. Fowler Inc. i. In-Kind Description Add Remove b. Job Title/Profession Professor	j. Date 09/05/2023 d. Comments	\$5,000.00 k. Amount \$5,000.00
f. Prior 3. Contr a. Full Na (include) Lawrence 1010 Hor	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) a G. Baxter mer St	Check	M.M. Fowler Inc. i. In-Kind Description Add Remove b. Job Title/Profession Professor c. Employer's Name/Specific Field	j. Date 09/05/2023 d. Comments	\$5,000.00 k. Amount \$5,000.00
f. Prior 3. Contr a. Full Na (include) Lawrence 1010 Hor	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) a G. Baxter mer St	Check	M.M. Fowler Inc. i. In-Kind Description Add Remove b. Job Title/Profession Professor c. Employer's Name/Specific Field Duke University	j. Date 09/05/2023 d. Comments	\$5,000.00 k. Amount \$5,000.00

OCT 03 7073

DURHAM BOE

4. Total only this page	\$5,350.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

) or	Page 7 of 4 contributions under \$50 if form CR		Amendm Yes	ent No
1. Commit	ttee Full Name (and F	und if applicable)				2. ID No	ımber
The Comm	nittee to Elect Mike Woo	odard					
3. Contri	butor Information		Add	Remove			
	me, Mailing Address	& Phone	b. Job Title/Profession			mments	
(includ	e city, state, & zip)		Att	torney			
Dawn Y B							
Durham, NC 27703-6668				Employer's Name/Specific Field			
			No	orth Carolina	e. Ele	ection Sum	to Date
							\$250.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. C	Date	k. Amount
	002	Credit Card			09/	11/2023	\$250.00
3. Contri	butor Information		Add	Remove	w III		
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Co	mments	
(includ	e city, state, & zip)		No	ot Employed			
Jill Beimdi							- 1
1308 Tam	arisk Ln NC 27703-4880		c. Employer's Name/Specific Field				
Duiriani, r	NC 27703-4880		No	ot Employed			
					e. El	ection Sun	
4 m.:		L. Francisco		t to Min d Demonstration	1		\$100.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	+÷	Date	k. Amount
	002	Check			09,	/13/2023	\$100.00
	butor Information		Add	Remove	100		
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Co	omments	
(includ	e city, state, & zip)		Re	eal Estate			- 1
	. Bergman						- 1
2807 Wade Rd Durham, NC 27705-5622			C.	Employer's Name/Specific Field			
20			Se	elf Employed			
					e. El	ection Sun	\$1,000.00
f. Prior	g. Account Code	h. Form of Payment		i, In-Kind Description	1 ; 7	Date	k. Amount
, Frior	002	Check		i. nerana pesanpuon		/08/2023	\$1,000.00
	v						- IVA

OCT 03 2023

DURHAM BOE

4. Total only this page	\$1,350.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			Page <u>8</u> of _ O or contributions under \$50 if form C		nent ✓ No
	ttee Full Name (and F	und if applicable)		2. ID N	umber
The Comr	nittee to Elect Mike Wo	oodard			
3. Contr	ibutor Information		Ndd Remove		
	me, Mailing Address ie city, state, & zip)	& Phone	b. Job Title/Profession real estate	d. Comments	
	Bergman ver Dairy Rd Ill, NC 27514-1540		c. Employer's Name/Specific Field Southern Repair	e. Election Sur	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	i. Date	\$1,000.00 k. Amount
I. FIIUI	002	Credit Card	is at-tand peacifical	09/05/2023	\$1,000.00
a. Full Na (includ Julia Borb 1013 Wat	ibutor Information ime, Mailing Address le city, state, & zip) ely-Brown ts St NC 27701-1534 g. Account Code		b. Job Title/Profession Legal Assistant c. Employer's Name/Specific Field Self-Help Credit Union i. In-Kind Description	e. Election Sur	n to Date \$175.00
	002	Check		09/21/2023	\$75.00
a. Full Na (includ Signe A. I 2 Marigolo			b. Job Title/Profession attorney c. Employer's Name/Specific Field	d. Comments	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	\$200.00
FRUI	002	Check	r nitano pesenhana	09/13/2023	\$200.00

OCT 0 3 7023

DURHAM BOE

4. Total only this page	\$1,275.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			or c	Page 9 of 4 contributions under \$50 if form CR		Amendme Yes	ent V No
	ttee Full Name (and Fi	und if applicable)				2. ID Nu	mber
The Comn	nittee to Elect Mike Woo	odard					
3, Contri	ibutor Information	A DA	dd	Remove	n S		
a. Full Na	me, Mailing Address	& Phone	b.J	ob Title/Profession	d,	Comments	
(includ	e city, state, & zip)		Ow	ner			
Stacey Bu	ırkert						
3812 Dover Rd			c. E	mployer's Name/Specific Field			
Durham, f	NC 27707-5107			ree Designs			
			Ū	-	e,	Election Sum	to Date
							\$250.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	I	j. Date	k. Amount
	002	Credit Card				08/31/2023	\$250.00
3. Contr	ibutor Information	□ A	Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession d. Comments				
(includ	le city, state, & zip)		Atto	orney			
Dotriols D	dean						
Patrick By 2614 Stua		-	c. Employer's Name/Specific Field Morningstar Law Group				
Durham, I	NC 27707-2836				1		
l					e. Election Sum to Date		
l							\$1,000.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
	002	Check				09/21/2023	\$1,000.00
3. Contr	ibutor Information		Add	Remove	Ü		
	me, Mailing Address	& Phone	b	Job Title/Profession	d	Comments	MAIL
(includ	le city, state, & zip)		Rea	al Estate			
Robert Ch							OCT 03 7023
2525 Lanier Pl Durham, NC 27705-5005			C. E	Employer's Name/Specific Field	1		
			TND Partners			DU	IRHAM BOI
					e	. Election Sum	
							\$500.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k, Amount
	002	Credit Card				08/30/2023	\$500.00

4. Total only this page	\$1,750.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			0 or	Page 10 of 4 contributions under \$50 if form CR		Amendm Yes	ent ✓ No
1. Commi	ttee Full Name (and F	und if applicable)	8 .			2. ID No	ımber
The Comr	nittee to Elect Mike Wo	odard					
3. Contr	ibuter Information		Add	Remove	(OE)		
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Cor	nments	
(includ	e city, state, & zip)		Re	etired - Social Worker			
Pamela B							
2440 Oxfo Raleigh, N	ord Rd NC 27608-1538		C.	Employer's Name/Specific Field			1
i tarongin, i	.0 21000 1000		Re	etired - DHS		na carrento dinera	
				The state of the s	e. Elec	tion Sun	
							\$1,000.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Da	ite	k. Amount
	002	Check			09/2	1/2023	\$1,000.00
3. Contr	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Cor	nments	
(includ	e city, state, & zip)		No	ot Employed			
Cal Coetz	99						- 1
209 N Ch	urch St	}		Employer's Name/Specific Field			- 1
Durham, I	NC 27701-3327			ot Employed			- 1
			140	St Employed	e. Ele	tion Sun	to Date
							\$2,250.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Da	ite	k. Amount
	002	Credit Card			09/1	2/2023	\$1,000.00
3. Contr	ibutor Information		Add	Remove	Kint a	57.0	MAIL
a, Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Cor	nments	
(includ	e city, state, & zip)		No	ot Employed			OCT 0 3 2023
Gretchen	Caalev						
8 Daile Ct			C.	Employer's Name/Specific Field		Ţ	DURHAM BO
Durham, I	NC 27712-3307	Ī		ot Employed			
			' "		e. Ele	ction Sun	to Date
							\$200.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j, Da	ite	k. Amount
	002	Check			09/1	3/2023	\$100.00

4. Total only this page	\$2,100.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			or contributions under \$50 if form CR	— I —	leπι ✓ No	
1. Commi	ittee Full Name (and F	fund if applicable)		2. ID N	umber	
The Comr	nittee to Elect Mike Wo	oodard				1
3. Contr	ibutor Information		Add Remove			ĺ
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments		
(include city, state, & zlp) John J. Cooper			President/CEO			
						l
328 Baytr	ree Ln NC 27615-1607		c. Employer's Name/Specific Field			
Raieigii, i	10 27015-1007		Cooper Tacia General Contracting			ı
			Company	e. Election Sun		1
					\$1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	1
	002 Check 09/21/				\$1,000.00	
3 Contr	ibutor Information		Add Remove		usia Pui	1
	ame, Mailing Address		b. Job Title/Profession	d. Comments		1
	de city, state, & zip)		Not Employed			1
12 Golde	Covington nrod Pl		c. Employer's Name/Specific Field			1
Durham,	NC 27705-1351	İ	Not Employed			
			Not Employed	e. Election Sur	1	
					\$500.00	l
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount]
	002	Check		09/08/2023	\$500.00	
3. Contr	ributor Information		Add Remove		IVI	AL
	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments		1
(includ	de city, state, & zip)		Retired		OCT	9 3 2023
Sara Cra	ven					
51 Daviss	son Dr		c. Employer's Name/Specific Field	1	DURH	AM BC
Durham, NC 27705-1398		Retired	1			
		, 1011.00	e. Election Sur	4		
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-Kind Description	j. Date	k. Amount]
	002	Check		09/13/2023	\$100.00	1

4. Total only this page	\$1,600.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			60 or	Page <u>12</u> of <u>4</u> contributions under \$50 if form CR	— , ,	Amendn Yes	nent ✓ No	
	ittee Full Name (and I	Fund if applicable)	- 14		7 7 22	2. ID N	umber	
The Com	mittee to Elect Mike Wo	oodard						
3. Contr	ibuter Information		Add	Remove	4460	/1 V Fr.		
a. Full Na	ame, Mailing Address	& Phone	b.	Job Title/Profession	d. Com	ments		
(includ	le city, state, & zip)		R€	ealtor				
	(Kim) Dawson							
701 Manor Ridge Dr Carrboro, NC 27510-2572			C.	Employer's Name/Specific Field				
			Se	elf empliyed	o Elect	ion Cun	n to Date	
					e. Eleci	ion our	\$100.00	
. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Dat	e	k. Amount	
	002	Credit Card			09/19	/2023	\$100.00	
						1000		
	ibutor Information		Add					
	ame, Mailing Address	& Phone		Job Title/Profession		d. Comments Food for Event		
	le city, state, & zip)		l vc	blunteer	F000 10	ood for Everit		
Deborah 1006 Mor	Dobbins nmouth Ave							
	NC 27701-1712		-	Employer's Name/Specific Field				
			110	one	e. Elect	tion Sun	n to Date	
							\$310.00	
. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Dat	e	k. Amount	
	002	In-Kind		Food for event	09/10	/2023	\$60.00	
3. Conti	ibutor Information		Add	Remove				
a. Full Na	ame, Mailing Address	& Phone	b.	Job Title/Profession	d. Com	ments	OCT U	
(includ	te city, state, & zip)		vo	olunteer				
	Dobbins						DURHA	
	nmouth Ave NC 27701-1712		C.	Employer's Name/Specific Field				
, arriarri,	110 27701 1712		no	one				
					e. Elect	ion Sun	n to Date \$310.00	
. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	i. Dat	a	k. Amount	
, FHUI	002	Credit Card		- newno nescription	T-	/2023	\$250,00	
					1 119711	771123		

4. Total only this page	\$410.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	V - //

			or c	Page 13 of 4 contributions under \$50 if form CR		Amendm Yes	ent ✓ No	
1. Commi	ttee Full Name (and F	und if applicable)	154		16.5	2. ID Nu	ımber	
The Comn	nittee to Elect Mike Wo	odard						
3. Contri	butor Information		Add	Remove				
a. Full Name, Mailing Address & Phone				ob Title/Profession	d. C	omments		
(includ	e city, state, & zip)		Atto	orney				
T. Greg D 311 E Mai								
	NC 27701-3717			mployer's Name/Specific Field Offices of T Greg Doucette				
			PLL		e.E	lection Sum	to Date	
							\$250.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j.	Date	k. Amount	
	002	Credit Card			09	9/07/2023	\$250.00	
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b. J	lob Title/Profession	d, Comments			
Carol Due			c. E	/sician Employer's Name/Specific Field				
					e. Election Sum to Date			
	·						\$100.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j.	Date	k. Amount	
	002	Credit Card			0:	9/06/2023	\$100.00	
3. Contr	ibutor Information		Add	Remove			MA	11
a. Full Na	ıme, Mailing Address	& Phone	b	Job Title/Profession	d. C	Comments		
(include city, state, & zip)				Attorney			OCT 03	7023
Rufus L. Edmisten 132 S Salisbury St Ste 300 Raleigh, NC 27601-1483			c. Employer's Name/Specific Field Edmisten Webb & Moore				DURHAM	ВС
					e. E	lection Sun	n to Date	
							\$500.00	
f. Prior	g. Account Code	h. Form of Payment		i, In-Kind Description	j.	Date	k. Amount	
	002	Check			0	9/25/2023	\$500.00	

4. Total only this page	\$850.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

	ttee Full Name (and I	Fund if applicable)		2. ID N	umber
The Comn	nittee to Elect Mike We	oodard			
3. Contri	ibutor Information		Add Remove		
	me, Mailing Address	& Phone	b, Job Title/Profession	d. Comments	
(includ	e city, state, & zip)		Investor		
Kurt Euler					
504 Comp Durham, N	NC 27707-2255		c. Employer's Name/Specific Field		
			Self	e. Election Sur	n to Date
					\$200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/07/2023	\$200.00
308 N Bud Apt A	angelisto chanan Blvd NC 27701-1561		c. Employer's Name/Specific Field Not Employed	e. Election Sur	n to Date \$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Check		09/13/2023	\$100.00
2 Contr	ibutor Information		Add Remove	Wer Carry 1977	MA
J. Conta		9 Phone	b. Job Title/Profession	d. Comments	
	me, Mailing Address	& Filone	D. JOD THIEN TOTESSION		
a. Full Na	me, Mailing Address le city, state, & zip)	a rhone	Real Estate Manager		OCT 0 3
a. Full Na (includ	le city, state, & zip) Everett	a r none			OCT 0 3
a. Full Na (includ Robinson 3 Chance	le city, state, & zip) Everett	a Filotie	Real Estate Manager c. Employer's Name/Specific Field		OCT 0 3
cinclud Robinson Chance	Everett	a Filone	Real Estate Manager		DURHA
a. Full Na (includ Robinson 8 Chance	Everett	a Filotie	Real Estate Manager c. Employer's Name/Specific Field	e. Election Sur	DURHA
a. Full Na (includ Robinson 8 Chance	Everett	h. Form of Payment	Real Estate Manager c. Employer's Name/Specific Field TEAM Inc		DURHA!

4. Total only this page	\$800.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			Page 15 of 4 or contributions under \$50 if form CR		ent ✓ No	
	ttee Full Name (and Fi	und if applicable)		2. ID No	umber	
The Comm	nittee to Elect Mike Woo	odard				
3. Contri	butor Information	□ A	dd Remove			
a. Full Name, Mailing Address & Phone			b. Job Title/Profession	d. Comments		J
	e city, state, & zip)		attorney			
Caroline Farmer 2813 Sandia Dr Raleigh, NC 27607-3149			c. Employer's Name/Specific Field			
			Nobou	e. Election Sun	n to Date	
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
O02 Credit Card			09/19/2023	\$100.00		
3. Contri	ibutor Information		dd Remove			
a. Full Name, Mailing Address & Phone			b. Job Title/Profession	d. Comments		
(include city, state, & zip)			Not Employed			
Joseph Fe 2214 Mye						
	NC 27707-1036		c. Employer's Name/Specific Field			
			Not Employed	e. Election Sun		
					\$100.00	1
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card		09/04/2023	\$100.00	
3. Contr	ibutor Information		Add Remove	C DESCRIPTION		MAIL
a. Fuli Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	ner	0.0
(include city, state, & zip)			Librarian		UCI	0 3 7023
Sally K Fe					DUR	IAM BOE
305 E Delafield Ave Durham, NC 27704-3225			c. Employer's Name/Specific Field		E. A. II	WINI BOF
			Durham County Library	e. Election Sur		
					\$200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount]
	002	Check		09/08/2023	\$200.00	

4. Total only this page	\$400.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			Page <u>16</u> of <u>4</u> 0 or contributions under \$50 if form CF		nent No
	ittee Full Name (and	Fund if applicable)		2. ID N	umber
The Com	mittee to Elect Mike W	oodard			
3. Contr	ibutor Information		Add Remove		
a. Full Na	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	de city, state, & zip)		Writer		
Edward E	3. Fiske				- 1
750 Wear Apt 245	ver Dairy Rd		c. Employer's Name/Specific Field		- 1
	ill, NC 27514-1493		Self-employed		
·				e. Election Sur	n to Date
					\$200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/06/2023	\$200.00
3. Contr	ributor Information		Add Remove		
SOUTH PART OF	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	de city, state, & zip)		Vice President		
Bryan Fo	v				- 1
909 Exun	n St		c. Employer's Name/Specific Field		
Durham,	NC 27701-2823		Greater Durham Chamber of	1	
			Commerce	e. Election Sum to Date	
					\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/16/2023	\$100.00
3. Contr	ributor Information		Add Remove		MA
a. Full Na	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	de city, state, & zip)		Not Employed		OCT 03
Cavett H	French				- 4
1014 Gre	en St		c. Employer's Name/Specific Field	1	DURHAN
Durham,	NC 27701-1520		Not Employed	E-SCH I/A	
				e. Election Sur	n to Date
					\$500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Check		09/13/2023	\$500.00
	L.				

4. Total only this page	\$800.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	Life Land

I. Comm	ittee Full Name (and I	Fund if applicable)		2. ID N	umber	
he Com	mittee to Elect Mike We	oodard				
. Cent	ributor Information	□ A	dd Remove			
	ame, Mailing Address		b. Job Title/Profession	d. Comments		
(inclu	de city, state, & zip)		Real Estate			
Mark Ga	lifianakis					
	NC 27602-1700	100	c. Employer's Name/Specific Field			
			Self	e. Election Sum to Date		
					\$500.00	
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date k. Amount 09/07/2023 \$500.00		
	002	Credit Card				
. Cont	ributor Information	□ A	dd Remove	Line Line		
. Full N	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments		
(inclu	de city, state, & zip)		Not Employed			
	Garneau					
	rkins Rd NC 27705-1018		c. Employer's Name/Specific Field	-		
			Not Employed	e. Election Sum to Date		
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card		09/14/2023	\$100.00	
3. Cont	ributor Information	_A	dd Remove		A SECTION	
a. Full N	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments		
(inclu	de city, state, & zip)		Not Employed		0	
	ahal					
John Go		l I		1		
2 Creek			c. Employer's Name/Specific Field		DUF	

4. Total only this page	\$800.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

i. In-Kind Description

h. Form of Payment

Credit Card

f. Prior

g. Account Code

002

\$200.00

\$200.00

k. Amount

j. Date

09/12/2023

			0 or	Page 18 of 4 contributions under \$50 if form CR		nent ✓ No
	ittee Full Name (and I	Fund if applicable)			2, ID N	umber
The Com	mittee to Elect Mike Wo	oodard				
3. Contr	ibuter Information		Add	Remove		A CHARLES
	ame, Mailing Address	& Phone	-	Job Title/Profession	d. Comments	
(includ	ie city, state, & zip)		Pt	HYSICIAN		
Ronald G						
	NC 27707-4518			Employer's Name/Specific Field JKE UNIVERSITY		
			-	5112 5111 211511	e. Election Sur	n to Date
						\$200.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount
	002	Check			09/21/2023	\$200.00
3. Contr	ributor Information		Add	Remove		
a. Full Na	ame, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments	
christoph 41 Green			C.	Employed Employer's Name/Specific Field ot Employed		
			'''		e. Election Sur	n to Date
						\$100.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount
	002	Credit Card			09/22/2023	\$100.00
3. Conti	ributor information		Add	Remove		MA
a. Full N	ame, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments	207.00
(include city, state, & zip)			Not Employed			061 0 3
Roslyn G	race Walker Way			Frankright Name (Constitution)		DURHAN
Durham,	NC 27703-3794			Employer's Name/Specific Field of Employed		
			'"	or Employed	e. Election Sur	n to Date
						\$100.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount
	002	Credit Card			09/16/2023	\$100.00

4. Total only this page	\$400.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

	•		0 or	Page 19 of 4 contributions under \$50 if form CR	 ;	ent ✓ No	
1. Commi	ttee Full Name (and F	und if applicable)			2. ID Nu	ımber	
The Comm	nittee to Elect Mike Wo	odard					
3. Contri	ibutor Information		Add	Remove			
a. Full Name, Mailing Address & Phone			b.	Job Title/Profession	d. Comments		
(includ	e city, state, & zip)		Vo	blunteer			
Laura H V							
3125 Corr	nwall Rd NC 27707-5101		C.	Employer's Name/Specific Field			
Dumam, 1	10 27 107-0101		La	ura Virkler			
					e. Election Sum	IM. DESCRIPTION OF THE PROPERTY OF THE PROPERT	
			L			\$100.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card			09/05/2023	\$100.00	
3. Contr	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments		
(includ	e city, state, & zip)		No	ot Employed			
Barbara H	laight						
2523 Sevi	ier St		C.	Employer's Name/Specific Field			
Durham, i	NC 27705-5818			ot Employed			
					e. Election Sun	to Date	
						\$250.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card			09/09/2023	\$250.00	
3. Contr	ibutor Information		Add	Remove		MA	NL
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments	0.00	
(includ	e city, state, & zip)		No	ot Employed		OCT O	2023
	E. Hancock					DUDLIA	
3609 Hath	naway Rd NC 27707-5138		c.	Employer's Name/Specific Field		DURHA	A BO
Duniani, i	NG 27707-3130		No	ot Employed			
					e. Election Sun		
						\$100.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount	
	002	Check			09/21/2023	\$100.00	

4. Total only this page	\$450.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			0 or (Page <u>20</u> of <u>4</u> contributions under \$50 if form CR		mendm]Yes	ent No
1. Commi	ittee Full Name (and I	und if applicable)	MH			2. ID No	umber
The Comr	mittee to Elect Mike Wo	oodard					
3. Centr	ibutor Information		Add	Remove			
a. Full Name, Mailing Address & Phone					d. Comn	nents	
(includ	le city, state, & zip)		Re	quested			1
James Hayward							
2844 Leas	sburg Rd NC 27574-9613		c. l	Employer's Name/Specific Field			
ROXDOIO,	NC 2/5/4-9013		Re	quested			
					e. Election	on Sum	
							\$100.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date		k. Amount
	002	Check			09/08/2	2023	\$100.00
3. Contr	butor Information		Add	Remove	ESTR		
a. Full Na	me, Mailing Address	& Phone	b.,	Job Title/Profession	d. Comn	nents	
Sarah Hill 905 W Ma			c. l	ner Employer's Name/Specific Field milton Hill Jewelry			
				······································	e. Election	on Sum	to Date
							\$250.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date		k. Amount
	002	Check			09/13/2	2023	\$250.00
3. Contr	ibutor Information		Add	Remove			MA
a. Full Na	ıme, Mailing Address	& Phone	b.,	Job Title/Profession	d. Comn	nents	
(includ	le city, state, & zip)		Lib	rarian			007 03
Carson H	olloway						T.
2305 W C	Club Blvd		c, l	Employer's Name/Specific Field			DURHAM
טurnam,	NC 27705-3111			ke University			
				*	e. Election	on Sun	to Date
							\$100.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j, Date		k. Amount
	002	Credit Card			09/04/2	2023	\$100.00

4. Total only this page	\$450.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			Page <u>21</u> of <u>4</u> or contributions under \$50 if form CR	Amendn O Yes	nent V No
1. Commi	ttee Full Name (and F	und if applicable)		2. ID N	umber
The Comr	nittee to Elect Mike Wo	oodard			
3. Contr	ibutor Information		Add Remove		1000
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
			Not Employed		
Bill Ingran					- 1
907 Hunts	sman Dr NC 27713-2382	ļ	c. Employer's Name/Specific Field		- 1
Darrigini, i	10 277 10-2002		Not Employed	200	
				e. Election Sur	
		1			\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/04/2023	\$100.00
3. Contr	ibutor Information		Add Remove		
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	e city, state, & zip)		Physician		- 1
Sandra Ja	acobi				- 1
19 Oak D	r		c. Employer's Name/Specific Field		1
Durham,	NC 27707-2131		Duke		
				e. Election Sur	n to Date
					\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Check		09/08/2023	\$100.00
3. Contr	ibutor Information		Add Remove		MAIL
	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	le city, state, & zip)		Not Employed		OCT 03 2078
Gregory	lacobs				
420 Jeror	ne Rd	ŀ	c. Employer's Name/Specific Field		DURHAM B
Durham,	NC 27713-1290		Not Employed	1	
				e. Election Sur	n to Date
	~				\$250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/12/2023	\$250.00

4. Total only this page	\$450.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

1. Comm	ittee Full Name (and F	und if applicable)			2. ID N	umber
The Com	mittee to Elect Mike Wo	oodard				
3. Conti	ributor Information		Add	Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Deborah L. Jakubs 10 Learned Pl			b. Job Title/Profession Not Employed		d. Comments	
			c. E	Employer's Name/Specific Field		
Durham,	NC 27705-5714			t Employed		
					e. Election Sun	
						\$100.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount
	002	Credit Card			09/17/2023	\$100.00
3. Conti	ributor Information		Add	Remove	Harris Land	
	ame, Mailing Address	& Phone	b.,	Job Title/Profession	d. Comments	
Ryan Jer 2059 Cai Chapel F	nkins rriage Way Iill, NC 27517-9424		GIL	Employer's Name/Specific Field		
					e. Election Sun	
						\$340.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount
	002	Credit Card			09/15/2023	\$100.00
3. Cont	ributor Information		Add	Remove		
a. Full N	ame, Mailing Address	& Phone	b.,	Job Title/Profession	d. Comments	WH
(inclu	de city, state, & zip)		Ins	urance		
Ryan Jer						OCT O
2059 Carriage Way Chapel Hill, NC 27517-9424			C.	Employer's Name/Specific Field		
la 2, .			GII	L	e. Election Sur	DURHA n to Date
					e, Election Sur	\$340.00
f. Prior	g. Account Code	h, Form of Payment		i. In-Kind Description	j, Date	k. Amount
I. FIIUI	A. Veroniii Code	-		n mrtune medecipaten	09/18/2023	
	002	Credit Card				\$20.00

4. Total only this page	\$220.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	100000

	•		0 or	Page 23 of 4 contributions under \$50 if form CR		nent No	
1. Commi	ttee Full Name (and F	und if applicable)			2. ID N	umber	
The Comm	nittee to Elect Mike Wo	odard					
3. Contr	ibutor Information		Add	Remove			
a. Full Na	a. Full Name, Mailing Address & Phone			Job Title/Profession	d. Comments		
(include city, state, & zip)			L.a	indscape Architect			
Dan A Jev	vell						
1025 Glor	ia Ave		C.	Employer's Name/Specific Field			
Durham, I	NC 27701-2011		No.	nomas & Hutton			
					e. Election Sum to Date		
						\$1,100.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount	
	002	Check			09/21/2023	\$1,000.00	
3. Contr	ibutor Information		Add	Remove	NEW TENE	178 164 169	1
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments		
(includ	e city, state, & zip)		Se	elf-Employed			
Harry & P	eregrine Kavros						
1311 Law	rence Rd		C.	Employer's Name/Specific Field			
Hillsborou	igh, NC 27278-8519		Ha	arry E. Kavros			
					e. Election Sur		
			<u> </u>			\$250.00	
f. Prior	g. Account Code	h. Form of Payment	t	i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card			09/01/2023	\$250.00	
3. Contr	ibuter Information		Add	Remove		M	М
a. Full Na	ıme, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments		NI L
(include city, state, & zip)		C	onsultant		OCT O	3 7027	
Phillip J Kirk Jr							7.117.3
3017 Old	Orchard Rd		C.	Employer's Name/Specific Field		DURHA	MBO
Kaleign, I	NC 27607-6565			elf Employed			1
					e. Election Sur	1	
	TZ					\$100.00	Į
& Daina	m Annausa Carlo	In Earn of Daymont		i In-Kind Description	i Date	k Amount	

4. Total only this page	\$1,350.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRQ-1100)	

09/25/2023

\$100.00

002

Check

1. Comm	not used nittee Full Name (and	Fund if applicable)		2. ID N	umber
The Com	mittee to Elect Mike W	oodard			
3. Cent	ributor Information		Add Remove		
a. Full N	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(inclu	de city, state, & zip)		Scientist		
Cynthia I	Kuhn				
2821 Wa	ide Rd NC 27705-5622		c. Employer's Name/Specific Field		
Julilaili,	NC 27705-5022		Duke University		2122222
				e. Election Sun	
				L	\$1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/15/2023	\$1,000.00
3. Cont	ributor Information		Add Remove		William Blo
a. Full N	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
Robert Li 116 N Ea Raleigh,			c. Employer's Name/Specific Field self emy		,1
				e. Election Sur	
				1	\$1,000.00
		1	1	1	1
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
f. Prior	g. Account Code	h. Form of Payment Credit Card	i. In-Kind Description	j. Date 09/06/2023	k. Amount \$1,000.00
	1	Credit Card	i. In-Kind Description Add Remove		
3. Cont	002	Credit Card			
3. Cont a. Full N (include	002 ributor Information ame, Mailing Address de city, state, & zip)	Credit Card	Add Remove	09/06/2023	\$1,000.00
3. Conta a. Full N (included) M. Julia I 3437 Dix	002 ributor Information ame, Mailing Address de city, state, & zip) Linehan con Rd	Credit Card	Add Remove b. Job Title/Profession	09/06/2023	\$1,000.00 OCT 0
3. Conta a. Full N (included) M. Julia I 3437 Dix	002 ributor Information ame, Mailing Address de city, state, & zip) Linehan	Credit Card	Add Remove b. Job Title/Profession Attorney	09/06/2023	\$1,000.00 0CT 0
3. Conta a. Full N (included) M. Julia I 3437 Dix	002 ributor Information ame, Mailing Address de city, state, & zip) Linehan con Rd	Credit Card	Add Remove b. Job Title/Profession Attorney c. Employer's Name/Specific Field	09/06/2023	\$1,000.00 0CT 0 DURHA
M. Julia I 3437 Dix Durham,	ributor Information ame, Mailing Address de city, state, & zip) Linehan on Rd NC 27707-4609	Credit Card	Add Remove b. Job Title/Profession Attorney c. Employer's Name/Specific Field Self-retired	d. Comments	\$1,000.00 OCT 0 DURHA n to Date \$150.00
3. Conta a. Full N (included) M. Julia I 3437 Dix	002 ributor Information ame, Mailing Address de city, state, & zip) Linehan con Rd	Credit Card	Add Remove b. Job Title/Profession Attorney c. Employer's Name/Specific Field Self-retired	09/06/2023	\$1,000.00 0CT 0 DURHA

4. Total only this page	\$2,150.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

	•		\$50 o	Page <u>25</u> of <u>4</u> or contributions under \$50 if form CR		Amendm Yes	ent No
	ttee Full Name (and F	und if applicable)				2. ID N	umber
The Comr	nittee to Elect Mike Wo	oodard					
3. Contr	ibutor Information		Add	Remove			制压器 [1]
a. Full Na	me, Mailing Address	& Phone	b	. Job Title/Profession	d. Com	ments	
(includ	e city, state, & zip)		8	lusiness owner			
	lern & Lowe						
	5 Indian Trl nam, NC 27705-3060			. Employer's Name/Specific Field			
				Patu Research	e. Elect	ion Sun	n to Date
							\$100.00
f. Prior	g. Account Code	h. Form of Paym	ent	i. In-Kind Description	j. Dat	е	k. Amount
	002	Credit Card			09/08	/2023	\$100.00
0.0.4	19. 4. 1. 5	n - hatire sharing	Ad	d Remove			
	ibutor Information me, Mailing Address		144444	. Job Title/Profession	d. Com	ments	
	le city, state, & zip)			lot Employed	d. Commons		
	McCorkle			. ,			
4811 Mor	ntvale Dr			: Employer's Name/Specific Field			
Durham,	NC 27705-4930		Not Employed				
						e. Election Sum to Date	
		1		T	1		\$100.00
f. Prior	g. Account Code	h. Form of Paym	ent	i, In-Kind Description	j. Dat		k. Amount
Ш	002	Credit Card			09/07	/2023	\$100.00
3. Contr	ibutor Information		Ad	d Remove			K
a. Full Na	ame, Mailing Address	& Phone	L	Job Title/Profession	d. Com	ments	n n
(includ	te city, state, & zip)		E	Banking			0ст
	cCormick						0,7
1635 Mai	rion Ave NC 27705-5808		•	. Employer's Name/Specific Field	1		PUN-
_ <u> </u>			5	Self-Help Credit Union	e. Election Sum to Date		
					G. E166	avii oui	\$85.00
f. Prior	g. Account Code	h, Form of Paym	ent	i. In-Kind Description	i. Da	te	k. Amount

4. Total only this page	\$285.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

002

Check

09/13/2023

\$85.00

	•		Page <u>26</u> of <u>-</u> 0 or contributions under \$50 if form CF	47 Amendr RO ☐Yes	Mo No
	ittee Full Name (and I	Fund if applicable)		2. ID N	umber
The Comr	mittee to Elect Mike We	oodard			
3. Contr	ibutor Information		Add Remove		
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	le city, state, & zip)		Academic Writer and attorney		- 1
Ruth McK					- 1
5139 Niag Chapel Hi	gra Dr ill, NC 27517-8179		c. Employer's Name/Specific Field	1	- 1
on aport in	,		(self) Ruth Ann McKinney PLLC	F1 - 41 - 6	- 1 - D-4 -
				e. Election Sur	\$100.00
6 D .	10.1	1. F CD 4		1:24	, , , , ,
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		08/31/2023	\$100.00
3. Contr	ibutor Information		Add Remove		
a. Full Na	ıme, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	le city, state, & zip)		Funeral Director		
	Sandra Meachem				- 1
3425 She	ridan Dr		c. Employer's Name/Specific Field	-	- 1
Durham, I	NC 27707-4643		Walter Sanders Funeral Home	1	
			Traile. Garlasis r and ar rising	e. Election Sum to Date	
					\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/17/2023	\$100.00
3. Contr	ibutor Information		Add Remove		9.40
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	MA
(includ	le city, state, & zip)		attomey		
Thomas F	R Miller				007 03
1110 Virg	inia Ave		c. Employer's Name/Specific Field	-	
Durham, I	NC 27705-3262		Retired	1	DURHAM
				e. Election Sur	n to Date
		n			\$700.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Check		09/13/2023	\$200,00

4. Total only this page	\$400.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

	•		Page 27 of 4 or contributions under \$50 if form CR	_ ; _	nent ✓ No	
1. Commi	ttee Full Name (and F	und if applicable)		2. ID N	umber	
The Comn	nittee to Elect Mike Wo	odard				
3. Contri	ibutor Information	□ A	dd Remove			
	me, Mailing Address e city, state, & zip)	& Phone	b. Job Title/Profession SECRETARY-TREASURER	d. Comments		
Fred G. M PO Box 6 Raleigh, N			c. Employer's Name/Specific Field MILLS CONSTRUCTION CO INC.	e. Election Sun	n to Date	
					\$1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Check		09/08/2023	\$1,000.00	
3. Contr	ibutor Information		Add Remove			
(includ Don Lelar 2114 Wils		s i none	b. Job Title/Profession Consultant c. Employer's Name/Specific Field Self Employed	d. Comments		
			Self-Employed	e. Election Sum to Date		
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Check		09/13/2023	\$100.00	
3. Contr	ibuter Information		Add Remove		M	ľΔI
a. Full Na	ıme, Mailing Address	& Phone	b. Job Title/Profession	d, Comments		
	le city, state, & zip)		Not Employed		ОСТ	03
Cathy Lynn Moore 712 Constitution Dr Unit E Durham, NC 27705-2801			c. Employer's Name/Specific Field Not Employed	DUR		M
,				e. Election Sum to Date		
L			11. 21.18	1: 2:	\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card		09/15/2023	\$100.00	

4. Total only this page	\$1,200.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

1205 is n I. Com m	ittee Full Name (and I	und if applicable)	a de la companya de	2. ID N	umber
The Com	mittee to Elect Mike We	oodard			
3. Conti	ributor Information		Add Remove		
	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	de city, state, & zip)		Not employed		
Thomas	Murray stchester Rd	ļ			
	NC 27707-5072	ŀ	c. Employer's Name/Specific Field		
			Not employed	e. Election Sur	n to Date
					\$200.00
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/14/2023	\$200.00
3. Cont	ributor Information		Add Remove		
a. Full N	ame, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(inclu	de city, state, & zip)		Address		
			Attorney		
	⊃. Nordan		Attorney		
2200 Cla			c. Employer's Name/Specific Field		
2200 Cla	P. Nordan yette Ct		·	e. Election Sur	n to Date
2200 Cla	P. Nordan yette Ct		c. Employer's Name/Specific Field	e. Election Sur	n to Date \$100.00
2200 Cla	P. Nordan yette Ct	h. Form of Payment	c. Employer's Name/Specific Field Wallace & NordanLLP	e. Election Sur	
2200 Cla Raleigh,	P. Nordan yette Ct NC 27612-3724	h. Form of Payment Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP		\$100.00
2200 Cla Raleigh,	P. Nordan yette Ct NC 27612-3724 g. Account Code	1	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description	j. Date	\$100.00 k. Amount
2200 Cla Raleigh, Prior 3. Centr	g. Account Code	Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description	j. Date	\$100.00 k. Amount
. Prior	g. Account Code	Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP I. In-Kind Description Add Remove	j. Date 09/21/2023	\$100.00 k. Amount
200 Cla Raleigh, Prior Centu. Full N (include	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip)	Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description Add Remove b. Job Title/Profession NOT EMPLOYED	j. Date 09/21/2023	\$100.00 k. Amount \$100.00
200 Cla Raleigh, Prior Control Graph Graph Argaret Fores	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip)	Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description Add Remove b. Job Title/Profession NOT EMPLOYED c. Employer's Name/Specific Field	j. Date 09/21/2023	\$100.00 k. Amount \$100.00
. Prior . Prior . Centu. Full N. (includ	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) Nordstrom t at Duke Dr	Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description Add Remove b. Job Title/Profession NOT EMPLOYED	j. Date 09/21/2023	\$100.00 k. Amount \$100.00
2200 Cla Raleigh, Prior 3. Centra Full N (include) Margaret 65 Fores	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) Nordstrom t at Duke Dr	Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description Add Remove b. Job Title/Profession NOT EMPLOYED c. Employer's Name/Specific Field	j. Date 09/21/2023 d. Comments	\$100.00 k. Amount \$100.00
2200 Cla Raleigh, Prior 3. Centra Full N (include Margaret 55 Fores	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) Nordstrom t at Duke Dr	Credit Card	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description Add Remove b. Job Title/Profession NOT EMPLOYED c. Employer's Name/Specific Field NOT EMPLOYED	j. Date 09/21/2023 d. Comments	\$100.00 k. Amount \$100.00 OCT DURF
Prior Centi Full N. (includargaret 5 Fores urham,	g. Account Code 002 ributor Information ame, Mailing Address de city, state, & zip) Nordstrom t at Duke Dr NC 27705-5639	Credit Card & Phone	c. Employer's Name/Specific Field Wallace & NordanLLP i. In-Kind Description Add Remove b. Job Title/Profession NOT EMPLOYED c. Employer's Name/Specific Field NOT EMPLOYED	j. Date 09/21/2023 d. Comments e. Election Sur	\$100.00 k. Amount \$100.00 OCT DURI n to Date \$100.00

4. Total only this page	\$400.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

1. Comn	nittee Full Name (and	Fund if applicable)			2. ID N	umber	
The Com	nmittee to Elect Mike W	oodard					
3. Cont	ributor Information		Add	d Remove			
a. Full Name, Mailing Address & Phone			b	. Job Title/Profession	d. Comments		
(inclu	de city, state, & zip)		N	ot Employed	Beverages and	Paper Goods	
Sandra (Ogburn				for event		
1320 Carroll St Durham, NC 27707-1665		C	. Employer's Name/Specific Field				
		N	lot Employed				
					e. Election Sum to Date		
		·			\$200.0		
f. Prior	g. Account Code	h. Form of Paym	ent	i. In-Kind Description	j. Date	k. Amount	
	002	In-Kind		Beverages and Paper Goods for event	09/10/2023	\$28.04	
3. Cont	tributor Information		Add	Remove			
a. Full N	lame, Mailing Address	& Phone	b	. Job Title/Profession	d. Comments		
(inclu	ide city, state, & zip)		N	lot Employed			
Sandra	Ogburn						
			c. Employer's Name/Specific Field				
1320 Ca	Durham, NC 27707-1665			lot Employed			
1320 Ca	, NG 2//U/-1005			iot Employed		e. Election Sum to Date	
1320 Ca	, NG 2//U/-1005		\	lot Employed	e. Election Sur	**************************************	
1320 Ca		.,		, ,		\$200.00	
1320 Ca Durham	g. Account Code	h. Form of Paym		i. In-Kind Description	j. Date	\$200.00 k. Amount	
1320 Ca Durham		h. Form of Paym		, ,		\$200.00	
1320 Ca Durham	g. Account Code	Check		i. In-Kind Description	j. Date	\$200.00 k. Amount	
1320 Ca Durham f. Prior	g. Account Code	Check	nent	i. In-Kind Description	j. Date	\$200.00 k. Amount	
f. Prior 3. Contact Supplies the supplies t	g. Account Code 002 tributor Information	Check	Add	i. In-Kind Description	j. Date 09/13/2023	\$200.00 k. Amount \$100.00	
f. Prior 3. Centa. Full N (inclu	g. Account Code 002 tributor Information lame, Mailing Address ude city, state, & zip)	Check	Add	i. In-Kind Description d Remove D. Job Title/Profession	j. Date 09/13/2023	\$200.00	
1320 Capurham f. Prior 3. Conta	g. Account Code 002 tributor Information lame, Mailing Address ude city, state, & zip)	Check	Add	i. In-Kind Description d Remove D. Job Title/Profession	j. Date 09/13/2023	\$200.00 k. Amount \$100.00	

4. Total only this page	\$328.04
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

Not Employed

i. In-Kind Description

h. Form of Payment

Credit Card

g. Account Code

002

f. Prior

e. Election Sum to Date

j. Date

08/30/2023

\$200.00

\$200.00

k. Amount

1205 is n	nittee Full Name (and	Fund if applicable)		2. ID N	umber
The Com	mittee to Elect Mike W	oodard			
3. Cont	ributor Information		Add Remove		
	ame, Mailing Address de city, state, & zip)	& Phone	b. Job Title/Profession Attorney	d. Comments	
	Reagan rdland Dr NC 27606-4476]	c. Employer's Name/Specific Field Retired		
				e. Election Sun	\$250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/18/2023	\$250.00
a. Full N	ributor Information ame, Mailing Address		Add Remove b. Job Title/Profession	d. Comments	
Michael I 1801 Jar	de city, state, & zip) Retchless nes St		Manager c. Employer's Name/Specific Field		
Michael I 1801 Jar Apt A	Retchless		_	e. Election Sun	n to Date \$100.00
Michael 1801 Jar Apt A Durham,	Retchiess mes St	h. Form of Payment	c. Employer's Name/Specific Field TROSA Inc	e. Election Sun	
Michael 1801 Jar Apt A Durham,	Retchless nes St NC 27707-2052	h. Form of Payment Credit Card	c. Employer's Name/Specific Field TROSA Inc		\$100.00
Michael 1801 Jar Apt A Durham,	Retchiess mes St NC 27707-2052 g. Account Code	Credit Card	c. Employer's Name/Specific Field TROSA Inc	j. Date	\$100.00 k. Amount
Michael 1801 Jar Apt A Durham, f. Prior	Retchiess mes St NC 27707-2052 g. Account Code 002	Credit Card	c. Employer's Name/Specific Field TROSA Inc i. In-Kind Description	j. Date	\$100.00 k. Amount \$100.00
Michael 1801 Jar Apt A Durham, f. Prior 3. Cont a. Full N (inclu Arthur Ro PO Box	Retchiess mes St NC 27707-2052 g. Account Code 002 ributor Information lame, Mailing Address de city, state, & zip) ogers 1202	Credit Card	c. Employer's Name/Specific Field TROSA Inc i. In-Kind Description Add Remove b. Job Title/Profession	j. Date 09/04/2023	\$100.00 k. Amount \$100.00
Michael 1801 Jar Apt A Durham, f. Prior 3. Cent a. Full N (inclu Arthur Re PO Box	Retchiess mes St NC 27707-2052 g. Account Code 002 ributor Information lame, Mailing Address de city, state, & zip) ogers	Credit Card	c. Employer's Name/Specific Field TROSA Inc i. In-Kind Description Add Remove b. Job Title/Profession Real Estate Investor	j. Date 09/04/2023 d. Comments	\$100.00 k. Amount \$100.00
Michael 1801 Jar Apt A Durham, f. Prior 3. Cont a. Full N (inclu Arthur Re	Retchiess mes St NC 27707-2052 g. Account Code 002 ributor Information lame, Mailing Address de city, state, & zip) ogers 1202	Credit Card	c. Employer's Name/Specific Field TROSA Inc i. In-Kind Description Add Remove b. Job Title/Profession Real Estate Investor c. Employer's Name/Specific Field	j. Date 09/04/2023	\$100.00 k. Amount \$100.00
Michael 1801 Jar Apt A Durham, f. Prior 3. Cont a. Full N (inclu Arthur Re	Retchiess mes St NC 27707-2052 g. Account Code 002 ributor Information lame, Mailing Address de city, state, & zip) ogers 1202	Credit Card	c. Employer's Name/Specific Field TROSA Inc i. In-Kind Description Add Remove b. Job Title/Profession Real Estate Investor c. Employer's Name/Specific Field Eno Ventures	j. Date 09/04/2023 d. Comments	\$100.00 k. Amount \$100.00

4. Total only this page	\$600.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	A RECORD

I. Commi	ttee Full Name (and I	und if applicable)		2, ID N	umber
he Comr	nittee to Elect Mike Wo	oodard			
3. Centr	ibutor Information		dd Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession Requested	d. Comments	
3 Cedar C	B Rosenstein Crest Trl NC 27503-8403		c. Employer's Name/Specific Field		
			Requested	e. Election Sur	n to Date
				e. Liection our	\$250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Check		09/21/2023	\$250.00
3. Contr	ibutor Information	DA C	dd Remove		
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	le city, state, & zip)		Not Employed		
Susan C I 4102 Wes		<u>.</u>			
Durham,	NC 27705-2849		c. Employer's Name/Specific Field Not Employed	i	
			Not Employed	e. Election Sum to Date	
					\$350.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/17/2023	\$250.00
3. Contr	ibutor Information	□A	dd Remove		
a. Full Na	ıme, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(includ	te city, state, & zip)		Not Employed		00
	Sappenfield				00
2511 W C			c. Employer's Name/Specific Field		Dim
Durham, NC 27705-3126				e. Election Sum to Date	

4. Total only this page	\$750.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

f. Prior

g. Account Code

002

h. Form of Payment

Credit Card

i. In-Kind Description

\$250.00

\$250.00

k. Amount

j. Date

09/07/2023

			50 or	Page 32 of 4 contributions under \$50 if form CR		Amendm	ent ✓ No
1, Comm	ittee Full Name (and I	Fund if applicable)				2. ID N	umber
The Com	mittee to Elect Mike We	oodard					
3. Contr	ibutor Information		Add	Remove			
a. Full Na	ame, Mailing Address	& Phone	b. Job Title/Profession		d. Cor	nments	
(inclue	ie city, state, & zip)		No	ot Employed			
Margaret							
	ewood Ave NC 27701-1106		Ç.	Employer's Name/Specific Field			
Julilain,	NG 27701-1100		No	ot Employed			
					e. Elec	ction Sun	n to Date
							\$1,250.00
f. Prior	g. Account Code	h. Form of Payment	£	i. In-Kind Description	j. Da	ite	k. Amount
	002	Credit Card			09/0	2/2023	\$1,000.00
3. Contr	ibutor Information		Add	Remove			
a. Full Na	ame, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments		
Nancy L. 1022 Ave Durham,				Employer's Name/Specific Field			
			ا ع	ate Of NC	e. Elec	ction Sun	n to Date
							\$100.00
f. Prior	g. Account Code	h. Form of Payment	t	i. In-Kind Description	j. Da	ite	k. Amount
	002	Check			09/2	1/2023	\$100.00
3. Contr	ributor Information		Add	Remove	Tes.	1158	NAD
a. Full Na	ame, Mailing Address	& Phone	b.	Job Title/Profession	d. Cor	nments	174
(includ	de city, state, & zip)		H	ousing Director			OCT O
	ane Seibel						
2410 Par Durham.	PI NC 27705-3162		C.	Employer's Name/Specific Field			DURHA
			R	einvestment Partners	a Ela	otion S.	n to Date
					e. Ele	Juon Sur	\$100.00
4 D-2	- A	& East of Barrer		i In Kind Departution	1: 5:	-4	k. Amount
f. Prior	g. Account Code	h. Form of Payment	į.	i. In-Kind Description	j. Da		
\Box	002	Credit Card			09/1	1/2023	\$100.00

4. Total only this page	\$1,200.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			Page 33 of 4 O or contributions under \$50 if form CR		nent No	
1. Commi	ttee Full Name (and F	und if applicable)		2. ID N	umber	
The Comm	nittee to Elect Mike Wo	odard				
3. Contri	ibuter Information		Add Remove			
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments		
(include city, state, & zip)			RETIRED			
Kitty P Sh						
1108 And			c. Employer's Name/Specific Field			
Durham, NC 27705-5821		RETIRED				
				e. Election Sur	n to Date \$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
i, Prior			i. m-Aine Description			
	002	Check		09/13/2023	\$100.00	
3. Contr	ibutor Information		Add Remove			
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments		
(includ	le city, state, & zip)		Not Employed			
C Donald	Stanger					
3940 Dov	er Rd NC 27707-5157		c. Employer's Name/Specific Field			
Dumain, i	10 21 101 -5151		Not Employed			
				e. Election Sur		
				L	\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card		09/17/2023	\$100.00	
3. Contr	ibutor Information		Add Remove			NAAH
a. Full Na	me, Mailing Address	& Phone	b, Job Title/Profession	d. Comments		WIAIL
(include city, state, & zip)			Attorney		29	CT A O
Shane St	anshurv				U	01 03 7523
2521 Perkins Rd Durham, NC 27705-1018			c. Employer's Name/Specific Field	-	5.1	
			Duke		DÜ	RHAM BO
				e. Election Sur		
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card		09/03/2023	\$100.00	

4. Total only this page	\$300.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

1 Commiss.				T	
i. Committe	ee Full Name (and I	und if applicable)	التانا كالإسراط والساوي	2. ID N	umber
The Commit	ittee to Elect Mike Wo	odard			
	outor Information		Add Remove		ABOUT S
a. Full Nam	ne, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
(include	city, state, & zip)		Business Development Mgr		
Judd Staple	es				
36 Birnham			c. Employer's Name/Specific Field		
Jurham, No	C 27707-5174		Duke University		
			-	e. Election Sum to Date	
					\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/04/2023	\$100.00
3 Contrib	outor Information		Add Remove		
in the last	ne, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	
	city, state, & zip)		Real estate		
Anne Stodd 1024 Miner			c. Employer's Name/Specific Field		
Durham, N	C 27701-2003	İ	Grubb Ventures		
			Grubb vertures	e. Election Sun	n to Date
					\$249.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	One did Count		09/18/2023	\$249.00
	002	Credit Card	I		
			Add FRemove	e Paring 1	
3. Contrib	outer Information		Add Remove	d Comments	NAA
3. Contrib a. Full Nam	outor Information ne, Mailing Address		b. Job Title/Profession	d. Comments	MA
3. Contrib a. Full Nam (include	outor Information ne, Mailing Address city, state, & zip)			d. Comments	MA
3. Contrib a. Full Nam (include	outor Information ne, Mailing Address city, state, & zip)		b. Job Title/Profession Not Employed	d. Comments	NIA OCT 0 3
3. Contrib a. Full Nam (include Jane Thorn 3125 Manc	outor Information ne, Mailing Address city, state, & zip)		b. Job Title/Profession Not Employed c. Employer's Name/Specific Field	d. Comments	
3. Contrib a. Full Nam (include Jane Thorn 3125 Manc	putor Information ne, Mailing Address city, state, & zip)		b. Job Title/Profession Not Employed		DURHAI
3. Contrib a. Full Nam (include Jane Thorn 3125 Manc	putor Information ne, Mailing Address city, state, & zip)		b. Job Title/Profession Not Employed c. Employer's Name/Specific Field	d. Comments e. Election Sur	DURHAI
3. Contrib a. Full Nam (include Jane Thorn 3125 Mand Durham, No	putor Information ne, Mailing Address city, state, & zip)		b. Job Title/Profession Not Employed c. Employer's Name/Specific Field Not Employed		n to Date

4. Total only this page	\$449.00
5. Total of ALL CRO-1216 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			Page <u>35</u> of <u>4</u> O or contributions under \$50 if form CF		nent ✓ No	
	ttee Full Name (and F	und if applicable)		2. ID N	umber	
The Comm	nittee to Elect Mike Wo	odard				
3. Centri	butor Information		Add Remove			
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments	d. Comments	
(includ	e city, state, & zip)		Plumber			
William L.						
	arkham Ave NC 27701-1529		c. Employer's Name/Specific Field	1		
,			ACME Plumbing	e. Election Sur	n to Date	
				AL MINORINII SOUL	\$500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
	002	Check		09/13/2023	\$500.00	1
						1
250/20000000000000000000000000000000000	butor Information		Add Remove b. Job Title/Profession	Ld Commonts		1
	me, Mailing Address e city, state, & zip)	& Flione	Not Employed	d. Comments		l
			Not Employed			
Jane W To 4016 Eber	ucker nezer Church Rd	ļ	c. Employer's Name/Specific Field	-		
Raleigh, N	IC 27612-4130		Not Employed			
			That Employee	e. Election Sur	n to Date	
					\$250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	1
	002	Check		09/25/2023	\$250.00	
3. Contr	butor Information		Add Remove			1
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Comments		1
(inelud	e city, state, & zip)		Not Employed	IVIA		AIL
Steven W	. Unruhe				net Y	D.
1011 Mine	erva Ave NC 27701-2002		c. Employer's Name/Specific Field	001.9		13 7/123
Durnam, i	10 27701-2002		Not Employed		100 1130 71	lu no
				e, Election Sur	n to Date \$100.00	NA RO
f. Prior	a. Account Code	h. Form of Payment	i, In-Kind Description	j. Date	k. Amount	1
	002	Credit Card		09/15/2023	\$100.00	1

4. Total only this page	\$850.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			Page 36 or 4 or contributions under \$50 if form CR	— ! —	☑No
1. Commi	ttee Full Name (and i	und if applicable)		2. ID N	umber
The Comn	nittee to Elect Mike Wo	oodard			
3. Contri	ibutor Information		vdd Remove		
	me, Mailing Address e city, state, & zip)	& Phone	b. Job Title/Profession Real estate	d. Comments	
Vincent Vo 800 Wilco Raleigh, N			c. Employer's Name/Specific Field CityPlat	e. Election Sun	n to Date \$250,00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Credit Card		09/07/2023	\$250.00
3 Contri	butor Information		vdd Remove		
John War		& Phone	b. Job Title/Profession Architect c. Employer's Name/Specific Field Alliance Architecture	d. Comments	
				e. Election Sun	\$500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	002	Check		09/21/2023	\$500.00
3. Contr	ibutor Information		ndd Remove		MAIL
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession Civil Engineer	d. Comments	OCT 0 3 757
Kelsey R. Westwood 823 Napier Dr Cary, NC 27519-7760		c. Employer's Name/Specific Field Kimley-Horn	e. Election Sun	n to Date \$100.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-Kind Description	j. Date	k. Amount
	002	Check		09/21/2023	\$100.00

4. Total only this page	\$850.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	, ,

			0 or	Page 37 of 4 contributions under \$50 if form CR		nent ✓ No	
1. Commi	ttee Full Name (and F	und if applicable)	ļ		2. ID N	umber	
The Comm	nittee to Elect Mike Wo	odard					
	buter Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone		Job Title/Profession	d. Comments		
(includ	e city, state, & zip)		Sta	aff Assist			
	Whitmore						
	ewood Ave NC 27705-4011		C.	Employer's Name/Specific Field			
Damain, i	10 2.700 70 7		Dι	ıke	. Fl		
					e. Election Sun	\$100.00	
				11.55.15	1		
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card		_ =	09/15/2023	\$100.00	
3. Contri	buter Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession d. Comments				
(includ	e city, state, & zip)		No	ot Employed		- 1	
Allen Wilc	ox					1	
213 Watts			c. Employer's Name/Specific Field			- 1	
Durnam, r	NC 27701-2036			ot Employed			
					e. Election Sum to Date		
					\$200.00		
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount	
	002	Credit Card			09/18/2023	\$200.00	
3. Contri	buter information		Add	Remove		MAAII	
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments	1947	
(includ	e city, state, & zip)		Owner		OCT 0 3 2022		
Robert L.	Wiley III					OCT 0 3 2023	
PO Box 3	612		C.	Employer's Name/Specific Field		DUDUAN	
Chapel Hill, NC 27515-3612				W Hope Valley Pointe LLC		DURHAN BO	
					e. Election Sur		
						\$250.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. Date	k. Amount	
	002	Check			09/21/2023	\$250.00	

4. Total only this page	\$550.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

			0 or	Page 38 of 4 contributions under \$50 if form CR	— i	Amendm Yes	ent ☑No		
1. Commi	ttee Full Name (and F	4100	2. ID No	ımber					
The Comn	nittee to Elect Mike Wo	odard							
3. Contributor Information Add Remove									
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments				
(includ	e city, state, & zip)		Administration						
Gerald Wi	Gerald Wilson								
	leybrook Dr NC 27705-2426		C.	Employer's Name/Specific Field					
			Duke University			e. Election Sum to Date			
					G. E.	ection out	\$100.00		
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j, I	Date	k. Amount		
	002	Check			09	/21/2023	\$100.00		

MAIL OCT 03 TOT DURHAM BOE

4. Total only this page	\$100.00
5. Total of ALL CRO-1210 Pages	\$31,816.04
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

Contribution	s from Political	Party Committee	S Pg 39 of	
Use this form to	report contributions	from a political party		Yes V No
1. Committee Ful	Name (and Fund if ap	plicable)		2. ID Number
The Committee to I	Elect Mike Woodard			
3. Contributor	Information	Add Remove		
	ling Address & Phone			b. Comments
North Carolina Der 220 St	nocratic Party			Voterfile Access
Raleigh, NC 27603	J-1724			c. Elec Cyc Sum to Date
			_	\$0.00
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyy	y) h. Amount
002	In-Kind	Voterfile Access	09/07/2023	\$1,050.00

MAIL oct o 3 7623

4. Total only this Page	\$1,050.00
5. Total of ALL CRO-1220 Pages	\$1,050.00
(This line must be on line 7 of Detailed Summary Page CRO-1100)	

Contributions from Other Political Committees Pg 40 Of 47 Amendment Yes V No Use this form to report contributions from other candidate, referendum or PAC committees 1. Committee Full Name (and Fund if applicable) The Committee to Elect Mike Woodard 3. Contributor Add Remove a. Full Name, Mailing Address & Phone (include b. Type of Committee d. Comments city, state & zip) Candidate ✓ PAC NC Realtors PAC Referendum 4511 Weybridge Ln c. Level Registered (Specify) Greensboro, NC 27407-7877 County: Federal ✓ State Municipality: e. Elec Cyc Sum to Date f. Account Code g. Form of Payment h. In-Kind Description i. Date (mm/dd/yyyy) j. Amount 002 Check 08/30/2023 \$6,400.00

MAIL OCT 0 3 7073

4. Total on this Page	\$6,400.00
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)	\$6,400.00

Disbursements

Page 41 of 47 Amendment Yes No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

	dinated party expenditure	AND DESCRIPTION OF THE PERSON NAMED IN						
1. Committee Full N	ame (and Fund if applica	able)			1876	2.	ID Number	
	Elect Mike Woodard							
3. Type of Disburse	ment (Please use sep-	arate C	RO-1310 forms	s for each type of Di	isbur	sement.)		
Operating Expens	ses Contribution:	s to Car	ndidates/Politica	al Committees [Co	ordinated Par	ty Expenditures	
4. Payee Informa	tion		Add R	emove	Wite.			
a. Full Name, Mailir	g Address & Phone		b. Coordinate	ed Committee Name	2	d. Comment	s	
(include city, state	e, & zip)							
Canital Promotions			a Lavel Pagi	stered (Specify)				
Capitol Promotions 2362 Oakdale Ave			Federal	County:				
Glenside, PA 19038	-4221		State	Municipality	4.	e. Election S	Rum to Date	
				Inidificipality	٧.	C. MICOGOTI C	\$4,072.00	
f. Account Code	la Come of Resement	In Day	rpose Code	i. Date (mm/dd/yyy	nd i	Amount	k. Required Remarks	
	g. Form of Payment	_	rpose code	09/14/2023	797 3-	\$1,923.00		
002	Debit Card	0		09/14/2023		\$1,923.00	Yard Signs	
4. Payee Informa	tion	E	Add R	emove				
a. Full Name. Mailir	ng Address & Phone		b. Coordinate	ed Committee Name	3	d. Comment	s	
(include city, state			1500					
(molace only, state	o' or wile)							
	ted Communications		c. Level Reai	stered (Specify)				
1250 Connecticut Av Ste 700	ve Nvv		Federal	County:				
Washington, DC 200	36-2657		State Municipality:			e. Election Sum to Date		
							\$34,941.43	
f. Account Code	g. Form of Payment	h. Pt	rpose Code	i. Date (mm/dd/yyy	/y)].	Amount	k. Required Remarks	
002	Electronic Funds Transfer	В		09/05/2023		\$1,625.00	Campaign Literature	
4. Payee Informa	tion	E	Add R	emove		MADE NO	A	
a. Full Name, Mailir	ng Address & Phone	777	b. Coordinate	ed Committee Name	9	d. Comment	is	
(include city, state	e, & zip)						OCT	
C				-4	_	-	OCT	
1250 Connecticut A	ted Communications ve NW			stered (Specify)	1			
Ste 700	70 1111		Federal County:			e. Election Sum to Date		
Washington, DC 200	036-2657		State	Municipality				
£ 1	T. F & D	16 B.		1 Data franciski sa		Am area 1	\$34,941.4	
f. Account Code	g. Form of Payment	_	rpose Code	i. Date (mm/dd/yyy	уу) J.		k. Required Remarks	
002	Electronic Funds Transfer	В		09/14/2023		\$21,311.18	Direct Mail	
5. Total only this	page						\$24,859.	
6. Total of ALL C								
DEFENSIVE SECURITIES	e 13a of Detailed Summa	nı Dogo	CDO 1100 F C	Inerating Evanges	7 4 1 1		\$40,965.	
		-			/D = 191	ani C	φ 4 0,905.	
, ,	e 13b of Detailed Summa					1		
	e 13c of Detailed Summa				benali	ures)		
Contraction of the property of the	s (List detailed Exper	diture	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon	San Called II	100	124 12 12		
A* - Media	B* - Printing			draising		To Another C		
E - salaries	F* - Equipment		G - Polit	ical Party	H* -	Holding Put	olic Office Expenses	
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund	
O* - Other								
	etailed explanation in	requi	red remarks	field (k)				

					Amendmer	nt		
Disbursements	Page	42	of .	47_	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)	OCCUPATIONS.			2. ID	Number	S DESCRIPTION OF		

	me (and Fund if applica		DEWAY BINE		2.	ID Number		
The Committee to E	lect Mike Woodard							
3. Type of Disbursen	nent (Please use sepa	rate CI	RO-1310 forms	for each type of Dis	bursement.)			
Operating Expense	es Contributions	to Can	didates/Politica	al Committees	Coordinated Pa	arty Expenditures		
4. Payee Informati	ion		Add Re	emove				
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name	d. Commen	its		
(include city, state,	& zip)				Direct Mail			
Convergence Targete	ed Communications		c. Level Real	stered (Specify)				
1250 Connecticut Ave Ste 700	e NW		Federal	County:				
Washington, DC 2003	36-2657		State	Municipality:	e. Election	Sum to Date		
						\$34,941.43		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i, Date (mm/dd/yyyy		k. Required Remarks		
002	Electronic Funds Transfer	В		09/25/2023	\$12,005.25	Direct Mail		
4. Payee Informati	ion		Add Re	emove				
a. Full Name, Mailing	g Address & Phone	1111	b. Coordinate	ed Committee Name	d. Commen	its		
(include city, state,	& zip)							
Joseph C. Woodard F	Printing Co.		c Level Pegi	stered (Specify)				
2815 S Saunders St	mang oo.		Federal	County:				
Raleigh, NC 27603-3	519		State	Municipality:	e. Election	e. Election Sum to Date		
						\$1,035.96		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyyy	r) j. Amount	k. Required Remarks		
002	Debit Card	В		09/14/2023	\$535.18	Letterhead and envelopes		
4. Payee informati	ion		Add R	emove		ΑΛΔΗ		
a. Full Name, Mailing	g Address & Phone		b. Coordinated Committee Name d. Comm			its		
(include city, state,	& zip)					001 03 20		
NGP Van, Inc.			c. Level Reai	stered (Specify)		001 - 0 VII		
655 15th St NW			Federal County:			2000		
Ste 650 Washington, DC 2000	05-5701		State Municipality: e. Ele			Election Sum to Date		
						\$1,000.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyyy		k. Required Remarks		
002	Debit Card	0		08/30/2023	\$500.00	Database		
		<u></u>			1			
5. Total only this	page	400			dia dia dia dia dia dia dia dia dia dia	\$13,040.43		
6. Total of ALL CF	RO-1310 Pages	VIS:						
(This line goes in line	13a of Detailed Summar	y Page	CRO-1100 if O	perating Expenses)		\$40,965.61		
(This line goes in line	13b of Detailed Summar	y Page	CRO-1100 if C	ontrib to Candidates/P	olitical Comm)			
(This line goes in line	13c of Detailed Summar	/ Page	CRO-1100 if C	oordinated Party Expe	nditures)			
7. Purpose Codes	(List detailed Expend	diture	code in (h.)	above)				
A* - Media	B* - Printing				D - To Another C	Candidate		
E - salaries	F* - Equipment		G - Politi	cal Party I	H* - Holding Pu	blic Office Expenses		
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* - Donation to	Legal Expense Fund		
O* - Other								
	talled explanation in	requir	ed remarks f	ield (k)	THE STATE OF			

		II.					4-
9 B	ıc	n	88	re:	on	\mathbf{a}	nts
_	1	ш	9.3				III.

				Amendmer	nt	
Page	43	of .	47	Yes	✓ No	

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

committees and coo	rdinated party expenditure	es						
1. Committee Full N	Name (and Fund if applic	able)				2.	ID Number	
The Committee to	Elect Mike Woodard							
3. Type of Disburse	ement (Please use sep	arate CR	O-1310 form:	s for each type of D	isburs	sement.)		
✓ Operating Exper	ses Contribution	s to Cand	idates/Politica	al Committees	Coo	ordinated Par	ty Expenditures	
4. Payee Informa	ntion		Add R	emove				
a. Full Name, Maille (include city, stat	ng Address & Phone e, & zip)		a. Coordinate	ed Committee Name	•	d. Commen	ts	
Office Depot			. Level Real	stered (Specify)				
1021 Beaver Creek			Federal	County:				
Apex, NC 27502-39	918		State Municipality:			e. Election Sum to Date		
							\$66.00	
f. Account Code	g. Form of Payment	h. Pur	pose Code	i. Date (mm/dd/yy	уу) ј. /	Amount	k. Required Remarks	
002	Debit Card	I		09/25/2023		\$66.00	Postage	
4. Payee Informa	ation		Add R	emove		WE THE		
	ng Address & Phone		b. Coordinat	ed Committee Name	e	d. Commen	ts	
(include city, stat	e, & zip)							
RR Campaigns			c. Level Rea	stered (Specify)				
PO Box 33523	0.500		Federal	County:				
Raleigh, NC 27636-3523			State Municipality:		y:	e. Election Sum to Date		
		1					\$5,000.00	
f. Account Code	g. Form of Payment	h. Pur	pose Code	i. Date (mm/dd/yy	уу) ј.	Amount	k. Required Remarks	
002	Check	0		09/01/2023		\$3,000.00	Campaign Services	

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5. Total only this	page			\$3,066.00
6. Total of ALL C	RO-1310 Pages			
(This line goes in line	\$40,965.61			
(This line goes in line) (This line goes in line)				
7. Purpose Code	s (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 P	ublic Office Expenses
1 - postage	J - Penalties	K* - Office Expenses	Q* - Donation	to Legal Expense Fund
O* - Other				
*Codes require d	etailed explanation in requi	red remarks field (k)		

	rsements From the efunds/reimbursements, in				OT	Amendment ☐Yes ✓ No		
1. Committee Full Nan	ne (and Fund if applicable	9)			2. IE) Number		
The Committee to Elect	Mike Woodard							
3. Payee Information	n	Add	Remove					
a. Full Name, Mailing A (include city, state,		Cand	of Committee			Receipt Date 0/07/2023		
North Carolina Democra 220 St	atic Party	,	rendum	rty	i. Original	Receipt Amt		
Raleigh, NC 27603-172	4	Fede		unty: inicipality:	\$1,050.00			
			f. Purpose Code			j. Election Sum To Date		
		Р				\$0.00		
b. Job Title/Profession	c. Employer's Name/	Specific	g. Comments		k. Account	Code		
15 - 15 - 1	I - D - 1 - 1 D 1			- D-t- (002	I - 4		
I. Form of Payment Check	m. Required Remarks Voterfile access			09/07/2023	m/dd/yyyy)	o. Amount \$1,050.00		
3. Payee Informatio	, 515	Add	Remove	09/07/2023		\$1,050.00		
a. Full Name, Mailing A			of Committee	Z III Wiles	h Original	Receipt Date		
(include city, state,		Can	Candidate PAC		09/10/2023			
Sandra Ogburn 1320 Carroll St		<u></u>	e. Level Registered		i. Original Receipt Amt			
Durham, NC 27707-166	35	III	Federal County: State Municipality:			\$28.04		
		f. Purpe	ose Code		j. Election	Sum To Date		
		P				\$200.00		
b. Job Title/Profession		Specific	g. Comments		k. Account	Code		
Not Employed	Not Employed				002			
I. Form of Payment	m. Required Remarks				m/dd/yyyy)	o. Amount		
Check	Beverages and Paper Go	oods for event		09/10/2023	3	\$28.04		

MAIL oct 03 2003

DURHAM BOE

4. Total only this page		\$1,078.04
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed	\$1,108.04	
6. Purpose Codes (List detailed	disbursement code in (f)	
L - Returned to Contributor	M - Overpayment for Service	N - Exceeded Contribution Limit
P* - Reimbursement of In-Kind	O* Other	
*Codes require detailed explana	tion in required remarks field (m	

Refunds/Reimbursements From the Use this form to report refunds/reimbursements, inc			Page 45 to the contri	of 47 butor	Amendment ☐ Yes ☑ No	
1. Committee Full Name (and Fund if applicable)				2.10	Number	
The Committee to Elect Mike Woodard						
3. Payee Information [Add	Remove	18111-517-		NI DIEKSTORI	
a. Full Name, Mailing Address & Phone	d. Typ	e of Committee	h. Original Receipt Date			
(include city, state, & zip)	Car	ndidate PA	C	09/10/2023		
(,,	Referendum Party e. Level Registered Federal County: State Municipality:					
Susan Perry 220 Forestwood Dr				i. Original Receipt Amt		
Durham, NC 27707-2236				\$30.00		
	f. Purp	ose Code		j. Election	Sum To Date	
	Р				\$0.00	
b. Job Title/Profession c. Employer's Name/S	pecific	g. Comments		k. Account	Code	
				002		
I. Form of Payment m. Required Remarks			n. Date (n	m/dd/yyyy)	o. Amount	
Check Food for event			09/10/202	3	\$30.00	

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PURHAM BOS

4. Total only this page	\$30.00				
5. Total of ALL CRO-1320 Pages	\$1,108.04				
(This line must be on line 16 of Detailed					
6. Purpose Codes (List detailed	disbursement code in (f)				
L - Returned to Contributor	- Returned to Contributor M - Overpayment for Service N - Exceede				
P* - Reimbursement of In-Kind					
*Codes require detailed explana	ation in required remarks field (n				

1. Committee to Elect Mike Woodard 2. ID Number The Committee to Elect Mike Woodard 2. Full Name, Mailing Address, & Phone (Include city, state & zip) Deborah Dobbins 1008 Monmouth Ave Durham, NC 27701-1712 Deborah Dobbins 1008 Monmouth Ave Durham, NC 27701-1712 Deborah Dobbins 1008 Monmouth Ave Durham, NC 27701-1712 Deborah Dobbins 2. Fair Market Amount 2. Full Name, Mailing Address, & Phone (Include city, state & zip) North Carolina Democratic Party 220 St. Referendum Other Receipt Source D. Type of contributor Add Remove 1. Data (Inmiddlyyyy) D. Fair Market Amount Other Receipt Source D. Type of contributor Other Receipt Source D. Type of	Use CRO-1215 if In-Kind Contributions were or will be re	efunded within 7	davs.	700 mark 100	
3. Contributor Information Add Remove a. Full Name, Mailing Address, & Phone (include city, state & zip) Deborah Dobbins 1008 Monmouth Ave Durham, NC 27701-1712 Deborah Dobbins 1008 Monmouth Ave Durham Monmouth Ave Durham, NC 27701-1712 Deborah Dobbins 1008 Monmouth Ave Durham Monmouth Add Remove 1008 Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave Durham Monmouth Ave		TING STE	Karan no a seri 1 8	2. ID Number	
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e. Description Food for event Solution Solution Food for event Solution Solution Food for event Food for event Solu		Onler Kec	eipt Source	d. Election Sum to Date	
Food for event 3. Contributor Information 3. Contributor Information 4. Add Remove 5. Type of contributor (include city, state & zip) North Carolina Democratic Party 220 St Raleigh, NC 27603-1724 Party PAC Referendum Other Receipt Source 6. Election Sum to Date \$0.00 Party PAC Referendum Other Receipt Source 7. Date (mm/dd/yyyy) 9. Fair Market Amount Voterfile Access 99/07/2023 \$1,050.00 3. Contributor Information Add Remove 4. Full Name, Malling Address, & Phone (include city, state & zip) Sandra Ogburn 1320 Carroll St Durham, NC 27707-1665 DURHAM BOS Party PAC Candidate Party PAC Condidate Party PAC Referendum Other Receipt Source 6. Election Sum to Date \$200.00 6. Description F. Date (mm/dd/yyyy) 9. Fair Market Amount 4. Folat only this page \$1,138.04			r	\$310.00	
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Individual	3. Contributor Information	Add R	emove		
North Carolina Democratic Party 220 St Raleigh, NC 27603-1724 Candidate Party PAC Referendum Other Receipt Source	a. Full Name, Mailing Address, & Phone	b. Type of co	ntributor	c. Comments	
220 St Raleigh, NC 27603-1724 PAC	(include city, state & zip)	Individual		Voterfile Access	
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3. Contributor Information a. Full Name, Mailing Address, & Phone (Include city, state & zip) Sandra Ogburn 1320 Carroll St Durham, NC 27707-1665 DURHAM SOE Referendum Other Receipt Source 6. Comments Party PAC Referendum Other Receipt Source d. Election Sum to Date \$200.00 e. Description F. Date (mm/dd/yyyy) g. Fair Market Amount Beverages and Paper Goods for event 4. Total only this page	e. Description		4 Data (manifoldistants)	a Gair Blacket Smanne	
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e. Description f. Date (mm/dd/yyyy) g. Fair Market Amount 09/10/2023 \$28.04 4. Total only this page	Voterfile Access 3. Contributor Information a. Full Name, Mailing Address, & Phone		09/07/2023 emove	\$1,050.00	
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In-Kind Contributions Use this form to report non-monetary contributions, donate Use CRO-1215 if In-Kind Contributions were or will be reference.		•	;	Amendment ☐ Yes ☑ No mmittee or fund.	
1. Committee Full Name (and Fund if applicable)	/ F 19 B B B		1 80 M	2. ID Number	
The Committee to Elect Mike Woodard					
3. Contributor Information	Add R	emove			
a. Full Name, Mailing Address, & Phone	b. Type of contributor			c. Comments	
(include city, state & zip)	Individual		F	Food for event	
Susan Perry 220 Forestwood Dr Durham, NC 27707-2236	Candidate Party PAC Referendu				
		eipt Source	d.	Election Sum to Date	
				\$0.00	
e. Description		f. Date (mm/dd/)	(ууу)	g. Fair Market Amount	

09/10/2023

Food for event

MAIL

OCT 0 3 7323

DUBHAM BOE

\$30.00

4. Total only this page	\$30.00
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$1,168.04