

Disclosure Report Cover

Amendment

☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

1. Committee Information

a. Full Name	c. ID Number
Committee to Elect STEPHANIE TENERY	56WMN7
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
326 NADIAS RIDGE DRIVE NEBO, NC 28761	07/08/2026
	e. Phone Number
	888-460-5165

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2026	03/03/2026	06/30/2026	STEPHANIE BAHUT TENERY

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign	☐ Party	Municipal	State/County
☐ PAC	☐ Referendum	☐ Organizational	☐ Organizational
☐ Independent Expenditure	☐ Joint Fundraiser	☐ Thirty-five day	☐ Quarterly
☐ Legal Expense Fund		☐ Pre-primary	☐ First
		☐ Pre-election	☒ Second
		☐ Pre-runoff	☐ Third
		☐ Semi-annual	☐ Fourth
		☐ Mid Year	☐ Semi-annual
		☐ Year End	☐ Mid Year
		☐ Final	☐ Year End
		☐ Special	☐ Final
			☐ Special
7. Type of Fund (if applicable, check one)		10. Special Report Name	
☐ Booster Fund			
☐ Building Fund			
☐ Other:			
8. Number of Fundraisers this Report			
- 0 -			

11. Account Information		11. Account Information	
a. Financial Institution Full Name	a. Financial Institution Full Name	b. Purpose	c. Account Code
STATE EMPLOYEES CREDIT UNION		Campaign	
		FINANCE	
c. Account Code	d. Period Begin Balance		d. Period Begin Balance
1	\$ 508.41		\$

CERTIFICATION

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

STEPHANIE B. TENERY

Printed Name of Signer

SBT

Signature of Appointed Treasurer

07/08/2026

Date

FOR OFFICE USE ONLY

Date Received:

7/10/2026

Employee:

K Wight

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☐ Hand Delivered
☐ Electronically Filed

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

2026-07-10

JUL 10 2026

Detailed Summary

Amendment

☐ Yes

☒ No

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Committee to elect Stephanie Tenery		Second Quarter 2026		56WMN7	
Start of Election Cycle: January 1, 2026		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 508.41		\$ - 0-	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 425.00		\$ 1681.34	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$ 307.50	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.25		\$ 0.27	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 425.25		\$ 1,989.11	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 61.31		\$ 602.92	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$ 513.84	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 61.31		\$ 1116.76	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 872.35		\$ 872.35	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

JUL 10 2026

Other Receipt Sources

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee To Elect Stephanie Tenery				5GWMN7	
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)					
☒ Interest ☐ Contributions from Not-for-Profit Organizations ☐ Outside Sources of Income					
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #		d. Comments	
STATE Employees Credit Union PO Box 29561 RALEIGH, NC 27626-0561 (888) 732-8562					
		c. Outside Source Explanation			
				e. Election Sum to Date	
				\$.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Electronic Credit	EARNED Interest	02/23/2006	\$ 0.04	
1	Electronic Credit	EARNED Interest	03/23/2006	\$ 0.04	
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #		d. Comments	
STATE Employees Credit Union PO Box 29561 RALEIGH, NC 27626-0561					
		c. Outside Source Explanation			
				e. Election Sum to Date	
				\$.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Electronic Credit	EARNED Interest	4/27/2006	\$.06	
1	Electronic Credit	EARNED Interest	5/27/2006	\$.06	
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #		d. Comments	
STATE Employees Credit Union PO Box 29561 RALEIGH, NC 27626-0561					
		c. Outside Source Explanation			
				e. Election Sum to Date	
				\$.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Electronic Credit	EARNED Interest	6/22/2006	\$.05	
1				\$	
5. Total only this Page				\$.25	
6. Total of ALL CRO-1250 Pages (This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest) (This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) (This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)				\$.25	

JUL 10 2006

Disbursements

Pg 1 of 3 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect STEPHANIE TENNER						56WMN7	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
STATE Employees Credit UNION PO Box 29561 RALEIGH NC 27626				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 6.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Chk. Debit	A 0	03/23/2026	\$ 1.00	Foundation Fee		
1	Elec. Debit	A 0	03/23/2026	\$ 1.00	Foundation Fee		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
STATE Employees Credit UNION PO Box 29561 RALEIGH, NC 27626				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 6.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	ELECTRONIC Debit	A 0	4/27/2026	\$ 1.00	Foundation Fee		
1	ELECTRONIC Debit	A 0	5/27/2026	\$ 1.00	Foundation Fee		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
STATE Employees Credit UNION PO Box 29561 RALEIGH, NC 27626				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	ELECTRONIC Debit	0	6/22/2026	\$ 1.00	Foundation Fee		
5. Total only this Page \$ 3.00							
6. Total of ALL CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
\$ 61.31							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 2 of 3 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Stephanie Tenery						5GW/MN7	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Act Blue, LLC / STRIDE PO Box 962017 / 354 Oyster Pt. Boston, MA 02196 BLVD. South San Francisco Secure. ActBlue.com / CA. 94086				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 9.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Elec. Debit	C	02/25/2006	\$ 1.33	SERVICE FEE STRIDE		
1	Electronic Debit	C	02/26/2006	\$.78	SERVICE FEE STRIDE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Act Blue, LLC / STRIDE PO Box 962017 / 354 Oyster Pt. Blvd. Boston, MA 02196 South San Francisco Secure. actblue.com / CA. 94086				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 9.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Electronic Debit	C	3/26/2006	\$ 1.33	SERVICE FEE STRIDE		
1	Electronic Debit	C	6/26/2006	\$ 4.63	SERVICE FEE STRIDE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Act Blue PO Box 962017 Boston, MA 02196 Secure. ActBlue.com				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 3.96	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Electronic Debit	C	02/25/2006	\$ 0.53	FEE / Act Blue		
1	Elec. Debit	C	02/26/2006	\$ 0.27	FEE ACT BLUE		
5. Total only this Page						\$ 8.87	
6. Total of ALL CRO-1310 Pages						\$ 6131	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 3 of 3 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Stephanie Tenery						5GWMN7	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Act Blue LLC PO Box 962017 Boston, MA 02196 sewure - Act Blue.com				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 3.96	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Elec. Debit	C	3/26/2026	\$.53	FEE / ACT BLUE		
1	Elec. Debit	C	6/26/2026	\$ 2.10	FEE / ACT BLUE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
STAPLES 1114 MORGANTON HEIGHTS BLVD. MORGANTON, NC 28655 (888) 439-6019				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 44.81	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	A/B	06/18/2026	\$ 44.81	BUSINESS CARDS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page						\$ 47.44	
6. Total of ALL CRO-1310 Pages						\$ 61.31	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Other Receipt Sources

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee To Elect STEPHANIE TENERY				5GN/MN7	
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)					
☒ Interest ☐ Contributions from Not-for-Profit Organizations ☐ Outside Sources of Income					
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
STATE Employees Credit Union PO Box 29561 RAleigh, NC 27626-0561 (888) 732-8562					
			c. Outside Source Explanation		
				e. Election Sum to Date	
				\$.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Electronic Credit	EARNED Interest	02/23/2026	\$.04	
1	Electronic Credit	EARNED Interest	03/23/2026	\$.04	
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
STATE Employees Credit Union PO Box 29561 RAleigh, NC 27626 (888) 732-8562					
			c. Outside Source Explanation		
				e. Election Sum to Date	
				\$.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Elec. Credit	EARNED Interest	04/27/2026	\$.06	
1	Elec. Credit	EARNED Interest	05/27/2026	\$.06	
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
STATE Employees Credit Union PO Box 29561 RAleigh, NC 27626 (888) 732-8562					
			c. Outside Source Explanation		
				e. Election Sum to Date	
				\$.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Elec. Credit	EARNED Interest	06/22/2026	\$.05	
				\$	
5. Total only this Page				\$.25	
6. Total of ALL CRO-1250 Pages				\$.25	
(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)					
(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)					
(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)					

JUL 10 2026

Contributions from Individuals

Pg 1 of 2 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee To Elect Stephanie Tenery					56WMN7	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Kerrie Hillman 828-260-7605 1001 Bartlette Rd. MARION, NC 28752 Kerrie.Kessler@gmail.com				NOT Employed		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				N/A		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	ELECTRONIC Debit	-	02/21/2026	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
JAMES REEL 2230 Zion Hill Rd. MARION, NC 28752 828-231-5558				Unemployed		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				N/A		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	Credit ELECTRONIC Debit	-	2/24/2026	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Debbie GROOVER 180 NORTH GARDEN ST. MARION, NC 28752 828-231-5558				SALES		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				Cheney Brothers		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	ELECTRONIC CREDIT	-	03/24/2026	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 125.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 425.00	

Contributions from Individuals

Pg 2 of 2 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee To Elect Stephanie Tenery					56 WMN7	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Chris Amsbury 1993 GRANTS MT. RD. MARION, NC 28752 704-293-1833				Retired		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				N/A		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check	-	04/29/2006	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
RAY B. HOUSE 44 EAST GLENVIEW STREET MARION, NC 28752 (828) 317-7447				N/A		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				NOT EMPLOYED Retired		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	Elec. Credit	-	06/26/2006	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 425.00	