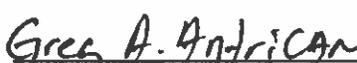
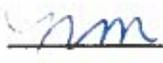


Disclosure Report Cover

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	
VOTE FRINK				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
516 N LORD ST SOUTHPORT, NC 28461			07/02/2023	
			e. Phone Number	
			(910) 352-8025	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2023	06/23/2023	07/02/2023	GREG A ANTRICAN	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		State/County		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<input checked="" type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
8. Number of Fundraisers this Report		10. Special Report Name		
0				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
BANK OF AMERICAN		STATE EMPLOYEE CREDIT UNION		
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CAMPAIGN ACCOUNT FOR VOTE FRINK	1	PERSONAL ACCOUNT	2	
	d. Period Begin Balance		d. Period Begin Balance	
	\$		\$	
CERTIFICATION				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board				
				07/02/2023
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received: 	Employee: 	Delivery Method		
Date Postmarked: 	Employee: _____	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed		
Date Scanned: 	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training		
Date Data Entered: _____	Employee: _____			
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.				

JUL 03 2023

Amendment
 Yes No

Detailed Summary

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	
VOTE FRINK		2023 Organizational			
Start of Election Cycle: January 1, 2023			Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start			\$ 0.00	\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00	\$ 0.00		
6) Contributions from Individuals (CRO-1210)		\$ 100.00	\$ 100.00		
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00		
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00		
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00		
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00		
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00		
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00		
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00		
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00		
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 100.00	\$ 100.00		
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 100.00	\$ 100.00		
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	\$ 0.00		
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00		
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00		
17) In-Kind Contributions (CRO-1510)		\$ 0.00	\$ 0.00		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 100.00	\$ 100.00		
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0.00	\$ 0.00		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00		
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00		
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00		
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00		

Contributions from Individuals

Pg 1 of 1

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	
VOTE FRINK					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
JWANTANA GARDNER FRINK 516 N LORD ST SOUTHPORT, NC 28461			BUSINESS OWNER		
			c. Employer's Name/Specific Field		
			OWN BUSINESS		e. Election Sum to Date
					\$ 100.00
f. Prior	g. Account Code	b. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	2	Check		06/23/2023	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 100.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 100.00

CRO-1210

NC State Board of Elections

April 2007

RECEIVED

JUL 03 2023

BRUNSWICK COUNTY
 BOARD OF ELECTIONS

Disbursements

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	
VOTE FRINK							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BANK OF AMERICAN 5070 SOUTHPORT-SUPPY RD SE SOUTHPORT, NC 28461 (910) 457-0371				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	O	06/23/2023	\$ 100.00	OPEN CAMPAIGN		
				\$	ACCOUNT		
5. Total only this Page						\$ 100.00	
6. Total of ALL CRO-1310 Pages						\$ 100.00	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
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)							

CRO-1310

NC State Board of Elections

December 2009

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JUL 03 2023

BURLINGHAM COUNTY
BOARD OF ELECTIONS