Disclosure Report Cover

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

Amendment ☒ Yes ☐ No

1. Committee Information

a. Full Name
COMMITTEE TO ELECT MIKE POZDOL

c. ID Number
93-2323753

b. Mailing Address (include City, State and Zip Code)
230 BARONEY PLACE DR
SUNSET BEACH
NC 28468

d. Date Filed
10/16/2023

e. Phone Number
910-274-2179

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2023	7/14/2023	09/26/2023	ALAN J. SUVALLE

6. Type of Committee (Check One)

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

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

☐ "Booster Fund"
☐ Building Fund

☐ Other:

8. Number of Fundraisers this Report

0

9. Type of Report (check only one type of report from one category)

Municipal
☐ Organizational
☒ Thirty-five day
☐ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

State/County
☐ Organizational
☐ Quarterly
☐ First
☐ Second
☐ Third
☐ Fourth
Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum
☐ Organizational
☐ Pre-referendum
☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name
UNITED BANK

b. Purpose	c. Account Code
COMMITTEE FUNDS	ZDFQC3
d. Period Begin Balance	
$ 0	

11. Account Information

a. Financial Institution Full Name

b. Purpose	c. Account Code
d. Period Begin Balance	
$	

CERTIFICATION

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

ALAN J. SUVALLE
Printed Name of Signer

Signature of Appointed Treasurer

10/16/2023
Date

FOR OFFICE USE ONLY

Date Received: **RECEIVED** — Employee: _PAL_

Date Postmarked: ~~OCT 16 2023~~ — Employee: _____

Date Scanned: ~~BRUNSWICK COUNTY~~ BOARD OF ELECTIONS — Employee: _____

Date Data Entered: _____ — Employee: _____

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

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

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

Detailed Summary

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

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
COMMITTEE TO ELECT MIKE POZDOL	2023 35 DAY REPORT	93-2323753

Start of Election Cycle: January 1, __2020__

			Total this Reporting Period	Total this Election Cycle
4)	Cash on Hand at Start		$ 0	$ 0

RECEIPTS

			Total this Reporting Period	Total this Election Cycle
5)	Aggregated Contributions from Individuals	(CRO-1205)	$ 330.00	$ 330.00
6)	Contributions from Individuals	(CRO-1210)	$ 4,556.90	$ 4,561.90
7)	Contributions from Political Party Committees	(CRO-1220)	$	$
8)	Contributions from Other Political Committees	(CRO-1230)	$	$
9)	Loan Proceeds	(CRO-1410)	$ 100.00	$ 100.00
10)	Refunds/Reimbursements To the Committee	(CRO-1240)	$	$
11)	Other Receipt Sources			
11a)	Interest on Bank Accounts	(CRO-1250)	$	$
11b)	Contributions from Not-for-Profit Organizations	(CRO-1250)	$	$
11c)	Outside Sources of Income	(CRO-1250)	$	$
11d)	Legal Expense Fund – Other Sources	(CRO-1270)	$	$
11e)	Exempt Purchase Price Sales	(CRO-1265)	$	$
12)	TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		$ 4,986.90	$ 4,991.90

EXPENDITURES

			Total this Reporting Period	Total this Election Cycle
13)	Disbursements			
13a)	Operating Expenditures	(CRO-1310)	$ 175.00	$ 175.00
13b)	Contributions to Candidates/Political Committees	(CRO-1310)	$	$
13c)	Coordinated Party Expenditures	(CRO-1310)	$	$
14)	Aggregated Non-Media Expenditures	(CRO-1315)	$ 40.00	$ 40.00
15)	Loan Repayments	(CRO-1420)	$	$
16)	Refunds/Reimbursements From the Committee	(CRO-1320)	$ 1,433.14	$ 1,433.14
17)	In-Kind Contributions	(CRO-1510)	$ 1,931.90	$ 1,936.90
18)	TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 3,580.04	$ 3,585.04
19)	Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 1,406.86	$ 1,406.86

ADDITIONAL INFORMATION

			Total this Reporting Period	Total this Election Cycle
20)	Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$	
21)	Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 100.00	
22)	Debts and Obligations owed By the Committee	(CRO-1610)	$	
23)	Debts and Obligations owed To the Committee	(CRO-1620)	$	
24)	Account Transfers Within the Committee	(CRO-1720)	$	
25)	Administrative Support	(CRO-1710)	$	$
26)	Forgiven Loans	(CRO-1440)	$	$
27)	48-Hour Notice Reports Sum	(CRO-2220)	$	$
28)	Contributions to be Refunded	(CRO-1215)	$	$

Aggregated Contributions from Individuals

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

Page 1 of 1

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO EECT MIKE POZDOL	93-2323753

3. Contributor Information

a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		ZDFQC3	CHECK		8/22/2023	$ 50.00
☐ Add ☐ Remove		ZDFQC3	CHECK		8/22/2023	$ 50.00
☐ Add ☐ Remove		ZDFQC3	CHECK		8/22/2023	$ 40.00
☐ Add ☐ Remove		ZDFQC3	CASH		8/28/2023	$ 40.00
☐ Add ☐ Remove		ZDFQC3	CHECK		8/28/2023	$ 50.00
☐ Add ☐ Remove		ZDFQC3	CHECK		8/28/2023	$ 50.00
☐ Add ☐ Remove		ZDFQC3	CHECK		9/1/2023	$ 50.00
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$
☐ Add ☐ Remove						$

4. Total only this Page	$ 330.00
5. Total of ALL CRO-1205 Pages	$ 330.00

(This line must be on line 5 of Detailed Summary Page CRO-1100)

CRO-1205   NC State Board of Elections   April 2007

Contributions from Individuals

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 MIKE POZDOL	93-2323753

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
MICHAEL J. POZDOL 230 BARONEY PLACE DR. SUNSET BEACH NC 28468	NO JOB TITLE	
	c. Employer's Name/Specific Field NOT EMPLOYED	
		e. Election Sum to Date $ 516.45

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		IN-KIND	EMBROIDERY	9/6/2023	$ 29.89
☐		IN-KIND	EVENT FOOD BEV	9/18/2023	$ 381.56
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
ALAN J. SUVALLE 105 PLANTERS RIDGE DR SUNSET BEACH NC 28468	NO JOB TITLE	
	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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/9/2023	$ 100.00
☐					$
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
LAWRENCE HERSHOFF 219 BARONEY PLACE DR SUNSET BEACH NC 28468	NO JOB TITLE	
	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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/9/2023	$ 100.00
☐					$
☐					$

4. Total only this Page	$	611.45
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$	4,556.90

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

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

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
TERRY PEDEN 224 BARONEY PLACE DR.. SUNSET BEACH NC 28468	NO JOB TITLE c. Employer's Name/Specific Field NOT EMPLOYED	

					e. Election Sum to Date
					$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/9/2023	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
JOHN BARTON 213 RICE MILL CIRCLE SUNSET BEACH NC 28468	NO JOB TITLE 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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/22/2023	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
STEVE GRAMZAY 218 BARONEY PLACE DR. SUNSET BEACH NC 28468	NO JOB TITLE 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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/22/2023	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4,556.90

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

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

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
DOUG BERGERE 222 BARONEY PLACE DR.. SUNSET BEACH NC 28468	NO JOB TITLE c. Employer's Name/Specific Field NOT EMPLOYED	

e. Election Sum to Date $ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/22/2023	$ 250.00
☐					$
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
TOM LAYDEN 103 FOREST WALK SUNSET BEACH NC 28468	NO JOB TITLE 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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/22/2023	$ 100.00
☐					$
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
MIKE MAISEL 290 CROOKED GULLEY CIR SUNSET BEACH NC 28468	NO JOB TITLE 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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/28/2023	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 450.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4,556.90

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
MICHAEL TRESCAK	NO JOB TITLE	
1303 FOREST CREEK ROAD	**c. Employer's Name/Specific Field**	
SUNSET BEACH	NOT EMPLOYED	
NC 28468		**e. Election Sum to Date**
		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/28/2023	$ 100.00
☐					$
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
FRANCIS CONWAY	NO JOB TITLE	
143 TALBOT COURT	**c. Employer's Name/Specific Field**	
SUNSET BEACH	NOT EMPLOYED	
NC 28468		**e. Election Sum to Date**
		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		8/28/2023	$ 100.00
☐					$
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
WAYNE MCGEE	NO JOB TITLE	
142 AVIAN DR # 3906	**c. Employer's Name/Specific Field**	
SUNSET BEACH	NOT EMPLOYED	
NC 28468		**e. Election Sum to Date**
		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		9/1/2023	$ 500.00
☐					$
☐					$

4. Total only this Page	$ 700.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4,556.90

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment: ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
RAY COAKLEY 134 CROOKED VALLEY CIR SUNSET BEACH NC 28468	NO JOB TITLE	
	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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		9/11/2023	$ 100.00
☐					$
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
GEORGE CURRIVAN 202 OLD OAK LANE SUNSET BEACH NC 28468	NO JOB TITLE	
	c. Employer's Name/Specific Field	
	NOT EMPLOYED	
		e. Election Sum to Date
		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		9/11/2023	$ 200.00
☐					$
☐					$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
LOWELL KENT 220 BARONEY PLACE DR. SUNSET BEACH NC 28468	NO JOB TITLE	
	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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		9/11/2023	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4,556.90

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment: ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
JOHN ROTHERMEL 631 EASTWARD PARK ROAD SUNSET BEACH NC 28468	NO JOB TITLE 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 (mm/dd/yyyy)	k. Amount	
☐	ZDFQC3	CHECK		9/11/2023	$	100.00
☐		IN-KIND	SIGNS	9/4/2023	$	1,121.84
☐		IN-KIND	DOOR HANGERS	9/5/2023	$	311.30

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
BOB CRAIG 2718 RUSTIC CROOKED CIRCLE SUNSET BEACH NC 28468	NO JOB TITLE 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 (mm/dd/yyyy)	k. Amount	
☐	ZDFQC3	CHECK		9/14/2023	$	100.00
☐					$	
☐					$	

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
DENNIS LITTLEFIELD 147 CROOKED GULLEY CIR #1B SUNSET BEACH NC 28468	NO JOB TITLE c. Employer's Name/Specific Field NOT EMPLOYED	e. Election Sum to Date $ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	ZDFQC3	CHECK		9/14/2023	$	75.00
☐					$	
☐					$	

4. Total only this Page	$	1,708.14
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$	4,556.90

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
JUDITH HARGRAVES 612 DEACON CT. SUNSET BEACH NC 28468	NO JOB TITLE	
	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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		9/14/2023	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
DIANE KREUZBURG 224 SEA TRAIL DRIVE WEST SUNSET BEACH NC 28468	NO JOB TITLE	
	c. Employer's Name/Specific Field	
	NOT EMPLOYED	
		e. Election Sum to Date
		$ 87.31

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		IN-KIND	EVENT FOOD BEV	9/18/2023	$ 87.31
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
JERRY TANNER 489 OSPREY COURT SUNSET BEACH NC 28468	NO JOB TITLE	
	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 (mm/dd/yyyy)	k. Amount
☐	ZDFQC3	CHECK		9/19/2023	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 287.31
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	$ 4,556.90

Loan Proceeds

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

Pg **1** of **1**

Amendment: ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
MICHAEL J. POZDOL 230 BARONEY PLACE DR. SUNSET BEACH NC 28468	NO JOB TITLE	
	c. Employer's Name/Specific Field	**e. Start Date (mm/dd/yyyy)**
	NOT EMPLOYED	7/17/2023
		f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount
%		ZDFQC3	CHECK	$ 100.00

l. Full Name of Lending Institution	m. Loan Number

4. Endorsers/Makers   (The people who guarantee the loan.)

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	**e. Amount**
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	**e. Amount**
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	**e. Amount**
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	**e. Amount**
	%	$

5. Total of ALL CRO-1410 Pages	
(This line must be on line 9 of Detailed Summary Page CRO-1100)	$ 100.00

CRO-1410   NC State Board of Elections   April 2007

Disbursements

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

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

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
TOWN OF SUNSET BEACH 700 SUNSET BLVD N. SUNSET BEACH NC 28468	**c. Level Registered (Specify)** ☐ Federal ☐ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $ 175.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ZDFQC3	CHECK	O	9/14/2023	$75.00	
ZDFQC3	CHECK	O	9/14/2023	$100.00	

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
			9/14/2023	$	
				$	

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	$ 175.00

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)

$ 175.00

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)

Aggregated Non-Media Expenditures

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

Amendment
☑ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	ZDFQC3	DEBIT	O	7/25/2023	$ 40.00	BANK FEE
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
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☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	

4. Total only this Page	$40.00
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$40.00

6. Purpose Codes (List detailed expenditure code in (d) above)

	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* - Donations to Legal Expense Fund
O* - Other			

* Codes require detailed explanation in required remarks field (g)

CRO-1315   NC State Board of Elections   December 2009

Refunds/Reimbursements From the Committee

Pg **1** of **1**

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
JOHN ROTHERMEL
631 EASTWARD PARK ROAD
SUNSET BEACH
NC 28468

d. Type of Committee
☒ Candidate   ☐ PAC
☐ Referendum   ☐ Party

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

f. Purpose Code
P

h. Original Receipt Date

i. Original Receipt Amount
$

j. Election Sum to Date
$ 100.00

b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code
NO JOB TITLE	NOT EMPLOYED		ZDFQC3

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
CHECK	REIMBURSEMENT FOR SIGNS AND DOOR HANGERS	9/11/2023	$ 1433.14

3. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

d. Type of Committee
☐ Candidate   ☐ PAC
☐ Referendum   ☐ Party

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

f. Purpose Code

h. Original Receipt Date

i. Original Receipt Amount
$

j. Election Sum to Date
$

b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
			$

3. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

d. Type of Committee
☐ Candidate   ☐ PAC
☐ Referendum   ☐ Party

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

f. Purpose Code

h. Original Receipt Date

i. Original Receipt Amount
$

j. Election Sum to Date
$

b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
			$

4. Total only this Page	$ 1,433.14
5. Total of ALL CRO-1320 Pages *(This line must be on line 16 of Detailed Summary Page CRO-1100)*	$ 1,433.14

L - Returned to Contributor   M - Overpayment for Service   N - Exceeded Contribution Limit
P* - Reimbursement of In-Kind   O* Other
* Codes require detailed explanation in required remarks field (m)

In-Kind Contributions

Pg 1 of 1

Amendment: ☒ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

MICHAEL POZDOL
230 BARONEY PLACE DR
SUNSET BEACH
NC 28468

b. Type of Contributor
☒ Individual
☐ Candidate
☐ Party
☐ PAC
☐ Referendum
☐ Other Receipt Source

c. Comments

d. Election Sum to Date $ 411.45

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
EMBROIDERY	9/6/2023	$ 29.89
EVENT FOOD & BEVERAGES	9/18/2023	$ 381.56
		$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

JOHN ROTHERMEL
631 EASTWARD PARK ROAD
SUNSET BEACH
NC 28468

b. Type of Contributor
☒ Individual
☐ Candidate
☐ Party
☐ PAC
☐ Referendum
☐ Other Receipt Source

c. Comments

d. Election Sum to Date $ 1,433.14

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
SIGNS	9/4/2023	$ 1121.84
DOOR HANGERS	9/5/2023	$ 311.30
		$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

DIANE KREUZBURG
224 SEA TRAIL DRIVE EAST
SUNSET BEACH
NC 28468

b. Type of Contributor
☒ Individual
☐ Candidate
☐ Party
☐ PAC
☐ Referendum
☐ Other Receipt Source

c. Comments

d. Election Sum to Date $ 87.31

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
EVENT FOOD & BEVERAGES	9/18/2023	$ 87.31
		$
		$

4. Total only this Page	$ 1,931.90
5. Total of ALL CRO-1510 Pages
(This line must be on line 17 of Detailed Summary Page CRO-1100)	$ 1,931.90

Outstanding Loans

Amendment ☒ Yes ☐ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT MIKE POZDOL	93-2323753

3. Lender Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
MICHAEL J. POZDOL 230 BARONEY PLACE DR. SUNSET BEACH NC 28468	NO JOB TITLE	
		e. Start Date (mm/dd/yyyy) 7/17/2023
	c. Employer's Name/Specific Field NOT EMPLOYED	
		f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		$ 100.00	$ 100.00

k. Full Name of Lending Institution	l. Loan Number

3. Lender Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
		e. Start Date (mm/dd/yyyy)
	c. Employer's Name/Specific Field	
		f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		$	$

k. Full Name of Lending Institution	l. Loan Number

3. Lender Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
		e. Start Date (mm/dd/yyyy)
	c. Employer's Name/Specific Field	
		f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		$	$

k. Full Name of Lending Institution	l. Loan Number

4. Total only this Page	$ 100.00
5. Total of ALL CRO-1430 Pages *(This line must be on line 21 of Detailed Summary Page CRO-1100)*	$ 100.00