

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 Committee to Elect Robert Carroll | c. ID Number |
| b. Mailing Address (include City, State and Zip Code) 307 E Nash Street, Southport, NC 28461 | d. Date Filed 09.28.2021 |
| | e. Phone Number 910.465.2717 |

| | | | |
|------------------------|---|---|--|
| 2. Report Year 2021 | 3. Period Start Date (mm/dd/yy) 08.04.2021 | 4. Period End Date (mm/dd/yy) 09.21.2021 | 5. Treasurer Full Name Robert Carroll |
|------------------------|---|---|--|

| | | | | |
|--|---|--|---|---|
| 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 | Municipal | State/County | Referendum |
| <input type="checkbox"/> PAC | <input type="checkbox"/> Referendum | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational |
| <input type="checkbox"/> Independent Expenditure | <input type="checkbox"/> Joint Fundraiser | <input checked="" type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Pre-referendum |
| <input type="checkbox"/> Legal Expense Fund | | <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First | <input type="checkbox"/> Final |
| 7. Type of Fund (if applicable, check one) | | <input type="checkbox"/> Pre-election | <input type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Booster Fund | | <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third | <input type="checkbox"/> Annual |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Semi-annual | <input type="checkbox"/> Fourth | <input type="checkbox"/> Special |
| <input type="checkbox"/> Other: | | <input type="checkbox"/> Mid Year | <input type="checkbox"/> Semi-annual | 10. Special Report Name |
| 8. Number of Fundraisers this Report | | <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year | |
| | | <input type="checkbox"/> Final | <input type="checkbox"/> Year End | |
| | | <input type="checkbox"/> Special | <input type="checkbox"/> Final | |
| | | | <input type="checkbox"/> Special | |

| | | | |
|--|------------------------------------|---|-------------------------------|
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name Truist | | a. Financial Institution Full Name N/A | |
| b. Purpose Campaign Transactions | c. Account Code RPC | b. Purpose | c. Account Code |
| | d. Period Begin Balance \$ 0.00 | | 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.

Robert Carroll [Signature] 9/28/2021
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: PL Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed
 Signer has not received mandatory training

Date Postmarked: **SEP 28 2021** Employee: _____
 Date Scanned: **BRUNSWICK COUNTY BOARD OF ELECTIONS** Employee: _____
 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.

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 Robert Carroll | | thirty-five day | | | |
| Start of Election Cycle: January 1, 2018 | | | Total this Reporting Period | | Total this Election Cycle |
| 4) Cash on Hand at Start | | | \$ 0 | | \$ 0 |
| RECEIPTS | | | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | | \$ | | \$ | |
| 6) Contributions from Individuals (CRO-1210) | | \$ 11,055.92 | | \$ 12,846.70 | |
| 7) Contributions from Political Party Committees (CRO-1220) | | \$ | | \$ | |
| 8) Contributions from Other Political Committees (CRO-1230) | | \$ | | \$ | |
| 9) Loan Proceeds (CRO-1410) | | \$ | | \$ | |
| 10) Refunds/Reimbursements to the Committee (CRO-1240) | | \$ 11,055.92 | | \$ 12,846.70 | |
| 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) | | \$ | | \$ | |
| EXPENDITURES | | | | | |
| 13) Disbursements | | | | | |
| 13a) Operating Expenditures (CRO-1310) | | \$ | | \$ | |
| 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) | | \$ 7,558.62 | | \$ 9,349.40 | |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 7,558.62 | | \$ 9,249.40 | |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 3,497.30 | | \$ 3,597.30 | |
| 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) | | \$ | | \$ | |

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 Robert Carroll | | | | | | | |
| 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 | |
| Shane Yount 11117 Brass Kettle Road Raleigh, NC 27614 919.522.1519 | | | | President | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Competitive Solutions, INC | | e. Election Sum to Date | |
| | | | | | | \$ 25.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | Credit/Debit Card | | 08.06.2021 | \$ 25.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 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 | |
| John Keiffer 515 Quarter Master Drive Southport, NC 28461 240.401.7191 | | | | no job title or profession | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | not employed | | e. Election Sum to Date | |
| | | | | | | \$ 50.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | Credit/Debit Card | | 08.06.2021 | \$ 50.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 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 | |
| Jessica Wainwright 1924 Bards Drive SE Bolivia, NC 28422 910.524.3463 | | | | real estate agent/Broker In Charge | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | RE/MAX Southern Coast/ real estate | | 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 | | |
| <input type="checkbox"/> | | Credit/Debit Card | | 08.06.2021 | \$ 100.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 175.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 11,055.92 | |

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 Robert Carroll | | | | | | |
| 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 | |
| Amanda and Joaquin Carbonell 1035 Third Ave S, Unit 302 Naples, FL 34102 404.372.6140 | | | | no job title or profession | | |
| | | | | 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 | |
| <input type="checkbox"/> | | Credit/Debit Card | | 08.07.2021 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Waren Watkins 400 Holiday Court, Ste 105 Warrenton, VA 20186 703.675.3844 | | | | Golf Course Owner | | |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | SouthStar/ golf course owner | 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 | |
| <input type="checkbox"/> | | Credit/Debit Card | | 08.07.2021 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Edward Glenn PO BOX 11059 Southport, NC 28461 212.893.6430 | | | | Fund Manager | | |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | Morgan Stanley/ fund manager | 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 | |
| <input type="checkbox"/> | | Credit/Debit Card | | 08.24.2021 | \$ 250.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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) | | | | | \$ 11,055.92 | |

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 Robert Carroll | | | | | | |
| 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 | |
| Joann Kimball 786 Skipjack Circle Southport, NC 28461 910.599.8614 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate agent | | 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 | |
| <input type="checkbox"/> | | Credit/Debit Card | | 08.30.2021 | \$ 500.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Bonita Bray 515 Quarter Master Drive Southport, NC 28461 301.741.6698 | | | no job title or profession | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | not employed | | e. Election Sum to Date | |
| | | | | \$ 124.92 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.05.2021 | \$ 124.92 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Eric Hoffman 800 Indigo Village Court Southport, NC 28461 919.349.1417 | | | VP | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | KCASBio | | e. Election Sum to Date | |
| | | | | \$ 120.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.05.2021 | \$ 120.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 744.92 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 11,055.92 | |

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 Robert Carroll | | | | | | |
| 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 | |
| Diann Sauble 4480 Millwright Circle Southport, NC 28461 910.713.9050 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate agent | | e. Election Sum to Date | |
| | | | | | \$ 224.92 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Credit/Debit Card | | | 09.05.2021 | \$ 100.00 |
| <input type="checkbox"/> | | Credit/Debit Card | | | 09.05.2021 | \$ 124.92 |
| <input type="checkbox"/> | | | | | | \$ |
| 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 | |
| Diana Setaro 4 Saint Andrews Drive Oak Island, NC 28465 910.294.1297 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate agent | | e. Election Sum to Date | |
| | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Credit/Debit Card | | | 09.10.2021 | \$ 120.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 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 | |
| Sally Spalding 310 E Nash Street Southport, NC 28461 910.713.9567 | | | no job title or profession | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | not employed | | e. Election Sum to Date | |
| | | | | | \$ 50.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Credit/Debit Card | | | 09.12.2021 | \$ 50.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | | \$ 394.92 |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ 11,055.92 |

Contributions from Individuals

| |
|--|
| Amendment |
| <input type="checkbox"/> Yes <input type="checkbox"/> 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 Robert Carroll | | | | | | |
| 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 | |
| Joy Hallman 104 SE 42nd Street Oak Island, NC 28465 704.740.8894 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate agent | | e. Election Sum to Date | |
| | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Credit/Debit Card | | | 09.15.2021 | \$ 120.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 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 | |
| Kathryn Winston 3276 Moss Hammock Wynd Southport, NC 28461 919.725.1710 | | | Laboratory Manager | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Duke University Health System | | e. Election Sum to Date | |
| | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Credit/Debit Card | | | 09.16.2021 | \$ 120.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 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 | |
| William Gralton 2002 Bonner Bussells Drive SE Southport, NC 28461 910.448.0446 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate agent | | e. Election Sum to Date | |
| | | | | | \$ 60.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Credit/Debit Card | | | 09.16.2021 | \$ 60.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 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) | | | | | | \$ 11,055.92 |

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 Robert Carroll | | | | | | | |
| 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 | |
| Artur Bajak 204 NE 52nd Street Oak Island, NC 28465 704.254.7020 | | | | Emergency Preparedness Specialist | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Duke Energy | | e. Election Sum to Date | |
| | | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.16.2021 | \$ 120.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 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 | |
| Marianne Huntley 311 E Nash Street Southport, NC 28461 201.247.2927 | | | | no job title or profession | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | not employed | | e. Election Sum to Date | |
| | | | | | | \$ 60.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.18.2021 | \$ 60.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 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 | |
| Tom Lott 511 Caswell Beach Road Caswell Beach, NC 28465 704.609.0852 | | | | Insurance Agent | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Anwins/Insurance | | e. Election Sum to Date | |
| | | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.18.2021 | \$ 120.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 300.00 | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ 11,055.92 | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | | |

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 Robert Carroll | | | | | | |
| 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 | |
| Carol Magnani 521 Pepperhill Road Southport, NC 28461 910.264.0519 | | | Advertising Director | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | The State Port Pilot/newspaper ad | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 62.62 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.18.2021 | \$ 62.62 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Meridith Muehleib 3760 Selwyn Circle Southport, NC 28461 703.581.9191 | | | business owner | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Uncorked by the Sea | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 374.92 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.18.2021 | \$ 124.92 | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.18.2021 | \$ 250.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Susan Romano 2731 Chadsworth Lane Southport, NC 28461 910.442.5663 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 60.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.20.2021 | \$ 60.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 497.54 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 11,055.92 | |

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 Robert Carroll | | | | | | |
| 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 |
| Jamie Deale 315 North Caswell Avenue Southport, NC 28461 910.713.8993 | | | | Carpenter | | |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | Mad River Designs | | |
| | | | | | | e. Election Sum to Date |
| | | | | | | \$ 124.92 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.21.2021 | \$ 124.92 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 |
| Rebecca McTavish 4018 Members Club Blvd. SE Southport, NC 28461 540.327.5700 | | | | real estate agent | | |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | RE/MAX Southern Coast/ real estate | | |
| | | | | | | e. Election Sum to Date |
| | | | | | | \$ 60.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Credit/Debit Card | | 09.21.2021 | \$ 60.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 |
| Margaret Singer 4020 Norseman Loop Unit 2 Southport, NC 28461 919.656.5692 | | | | real estate agent | | |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | RE/MAX Southern Coast. real estate | | |
| | | | | | | e. Election Sum to Date |
| | | | | | | \$ 60.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 09.16.2021 | \$ 60.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 244.92 |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ 11,055.92 |

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 Robert Carroll | | | | | | |
| 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 | |
| Donna Findlay 202 SE 64th Street Oak Island, NC 28465 910.264.3049 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate | | e. Election Sum to Date | |
| | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 09.16.2021 | \$ 120.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Karen Boyan 310 N Atlantic Ave Southport, NC 28461 704.904.0845 | | | real estate agent | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | 5 Points Realty/ real estate | | e. Election Sum to Date | |
| | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 09.14.2021 | \$ 120.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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 | |
| Judy Houck 2004 Bonner Bussells Drive Southport, NC 28461 910.880.0728 | | | Office Manager | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RE/MAX Southern Coast/ real estate | | e. Election Sum to Date | |
| | | | | | \$ 150.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 09.10.2021 | \$ 150.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 390.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 11,055.92 | |

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 Robert Carroll | | | | | | |
| 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 |
| Robert Carroll 307 E Nash Street Southport, NC 28461 910.465.2717 | | | | real estate agent | | |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | RE/MAX Southern Coast/ real estate | | |
| | | | | e. Election Sum to Date | | |
| | | | | \$ 9349.40 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | | Car Magnets | 08.09.2021 | \$ 269.64 | |
| <input type="checkbox"/> | | | Buttons | 09.02.2021 | \$ 227.79 | |
| <input type="checkbox"/> | | | Shirts, signs, rack cards, door hangers stickers, t shirts | 08.31.2021 | \$ 3,488.27 | |
| 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 |
| Robert Carroll 307 E Nash Street Southport, NC 28461 910.465.2717 | | | | real estate agent | | |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | RE/MAX Southern Coast/ real estate | | |
| | | | | e. Election Sum to Date | | |
| | | | | \$ 9,349.40 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | | Marketing/Advertising (frontage) | 08.12.2021 | \$ 1036.46 | |
| <input type="checkbox"/> | | | Marketing/Advertising (frontage) | 09.07.2021 | \$ 1036.46 | |
| <input type="checkbox"/> | | | Food for 09.26.2021 Fundraiser | 09.13.2021 | \$ 1500.00 | |
| 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 |
| | | | | | | |
| | | | | 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 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 7,558.62 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 11,055.92 | |

In-Kind Contributions

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 Robert Carroll | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | |
| a. Full Name, Mailing Address & Phone (Include city, state, & zip) | | b. Type of Contributor |
| Robert Carroll 307 E Nash Street Southport, NC 28461 910.465.2717 | | <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source |
| | | c. Comments |
| | | d. Election Sum to Date |
| | | \$ 9,349.40 |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| Car Magnets | 08.09.2021 | \$ 269.64 |
| Buttons | 09.02.2021 | \$ 227.79 |
| Shirts, signs, rack cards, door hangers, stickers, t shirts | 08.31.2021 | \$ 3,488.27 |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | |
| a. Full Name, Mailing Address & Phone (Include city, state, & zip) | | b. Type of Contributor |
| Robert Carroll 307 E Nash Street Southport, NC 28461 910.465.2717 | | <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source |
| | | c. Comments |
| | | d. Election Sum to Date |
| | | \$ 9,349.40 |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| Marketing/Advertising (frontage) | 08.12.2021 | \$ 1,036.46 |
| Marketing/Advertising (frontage) | 09.07.2021 | \$ 1,036.46 |
| Food for 09.26.2021 Fundraiser | 09.13.2021 | \$ 1,500.00 |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | |
| a. Full Name, Mailing Address & Phone (Include city, state, & zip) | | b. Type of Contributor |
| | | <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source |
| | | c. Comments |
| | | d. Election Sum to Date |
| | | \$ |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | \$ |
| | | \$ |
| | | \$ |
| 4. Total only this Page | | \$ 7,558.62 |
| 5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100) | | \$ 7,558.62 |