$\boxtimes$ 

No

Disclosure Report Cover Do not use this form to update information

| 1. Committee Info                             | ormation   |  | FORSYTH  | nnin er officier   |  |
|---|--|--|--|--|--|
| ı. Full Name                                  |  |  | UARUUT   | E07Invs  | c. ID Number   |
| Hardman 4 School                              | ls   |  |  |  | 1  |
| Mailing Address (                             |  | 2  | 022 JUL - 8  | AHI: 16  | 1  |
| PO Box 251                                    | clude City, State and Zip Code)                                    |  |  |  | d. Date Filed  |
| 4715 Yadkinville I                            | 84   |  | 100 F 113<br>100 F 11<br>100   | Ly is th   | 07/08/22   |
| Pfafftown, NC                                 |  |  |  | ×  |  |
| 27040   |  |  |  |  | e. Phone Number  |
|   |  |  |  |  | 336 817 4210   |
| . Report Year                                 | 3. Period Start Date (mm   | /dd/yy) 4. Period<br>(mm/dd/yy)                | l End Date   | 5. Treasurer F   | ull Name   |
| 2022  | 05/01/22   |  | 6/30/22  | Edward R Hard  | lman   |
| . Type of Commit                              |  | 9. Type of Repor                               | rt (check o  | nly one type of ren  | ort from one category)   |
| Candidate Camp                                | oaign 🔲 Party  | Municipal                                      | and the second sec | County   | Referendum   |
| PAC   | Referendum   | Organization                                   |  | Organizational   | Organizational   |
| Independent<br>Expenditure<br>Legal Expense F | Joint Fundraiser   | Thirty-five d                                  | ay   | Quarterly  | Pre-referendum   |
| Type of Fund                                  | (if applicable, check one)   |  |  |  |  |
| "Booster Fund"                                | (1) upplicable, check one)   | Pre-primary<br>Pre-election                    |  | First  | Final  |
| Building Fund                                 |  | Pre-election<br>Pre-runoff                     |  | Second   | Supplemental Final   |
|   |  | Semi-annual                                    |  | Third  | Annual   |
| _   |  | Mid Yes  | ar   | Fourth<br>Semi-annual  | Special  |
| Other:  |  | Year En  | 1  | Mid Year   | 10. Special Report Name  |
|   |  | Final  | 11   | Year End   | to. special Report Name  |
| Number of Fund                                | raisers this Report  | Special  | Г  | Final  |  |
|   | 0  | ]  |  | Special  |  |
| I. Account Inform                             |  |  | 11. Account  | ·  |  |
| Financial Institution ]                       |  |  |  | titution Full Name   |  |
| llegacy Federal Cr                            | redit Union  |  |  |  |  |
| Purpose                                       | c. Account Code  |  | b. Purpose   |  | c. Account Code  |
| or All  | H4   | S  |  |  |  |
| ampaign                                       |  |  | -  |  |  |
| xpenses                                       | d. Period Begin Balance  | 8  |  |  | d. Period Begin Balance  |
|   | \$ 1043.60   |  |  |  | \$   |
| ERTIFICATION                                  |  |  |  |  |  |
| ertify that the Con                           | mittee or Fund is in compli  | ance with all applica                          | able provisions  | of Article 22A, 22I  | 3, & 22D-22M of Chapter 163 of   |
| a rio General Dialo                           | thes and mat no junus are co                                       | mmingled with proh                             | lihited or other i   | non displaced fund   | 3, & 22D-22M of Chapter 163 c<br>s. I further certify that this report |
| Edward R H                                    | contect and mat I have been  | urained by the NC                              | state Board of E   | lections   |  |
|   | Printed Name of Signer   |  | went of the  | andman   | 07/08/22   |
| R OFFICE USE O                                |  | S  | ignature of Appoint  | red Treasurer  | Date   |
| Date Received:                                |  |  |  |  | Delivery Method  |
| Sure Received:                                |  | Employee:                                      |  |  | Normal Mail  |
| Date Postmarked                               | 1:   | Employee:                                      |  |  | Registered Mail  |
|   |  | Employee.                                      |  |  | Hand Delivered   |
| Date Scanned:                                 |  | Employee:                                      |  |  | Electronically Filed   |
|   |  | 1  |  |  | Signer has not received  |
| Date Data Entere                              | ed:  | Employee:                                      |  |  | mandatory training   |
|   |  |  |  |  |  |
| lease Note: This                              | form cannot he used to am  | end committee info-                            | mation and -   | the end of the second sec |  |
| lease Note: This                              | form cannot be used to amo<br>custodia                             | end committee information of books information | mation such as i   | the committee addr   | ess, treasurer, assistant treasure                                     |
|   | form cannot be used to am<br>custodia<br>You must amend the Staten | I OI DOOKS Informati                           | ion, or account i  | nformation,  |  |

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

| Use this form to summarize all disclosure reporting forms and<br><b>1. Committee Full Name (and Fund if applicable)</b> 2. | Type of Repor |                                | 2 TD 57                               |
|--|---------------|--------------------------------|---------------------------------------|
|  | econd Quarter |                                | 3. ID Number                          |
|  | Zumerr 1      |                                | I                                     |
| Start of Election Cycle: January 1,  | 2022          | Total this                     | Total this                            |
| 4) Cash on Hand at Start   |               | Reporting Period<br>\$ 1043.60 | Election Cycle<br>\$ 1043.60          |
| RECEIPTS   |               |                                | φ 1045.00                             |
| 5) Aggregated Contributions from Individuals   | (CRO-1205)    | \$                             | \$                                    |
| 6) Contributions from Individuals  | (CRO-1210)    | \$ 1603.16                     | \$ 1603.16                            |
| 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) 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)    | \$                             | \$                                    |
| 11 e) Exempt Purchase Price Sales  | (CRO-1265)    | \$                             | \$                                    |
| 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11  | d and 11e)    | \$ 1603.16                     | \$ 1603.16                            |
| EXPENDITURES   |               |                                |                                       |
| 3) Disbursements   |               |                                |                                       |
| 13a) Operating Expenditures  | (CRO-1310)    | \$ 2076.04                     | \$ 2076.04                            |
| 13b) Contributions to Candidates/Political Committees  | (CRO-1310)    | \$                             | \$                                    |
| 13c) Coordinated Party Expenditures  | (CRO-1310)    | \$                             | \$                                    |
| 4) Aggregated Non-Media Expenditures   | (CRO-1315)    | \$                             | \$                                    |
| 5) Loan Repayments   | (CRO-1420)    | \$                             | \$                                    |
| 6) Refunds/Reimbursements From the Committee   | (CRO-1320)    | \$                             | \$                                    |
| 7) In-Kind Contributions   | (CRO-1510)    | \$ 78.16                       | \$ 78.16                              |
| 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16   |               | \$ 2154.20                     | \$ 2154.20                            |
| 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract   |               | \$ 492.56                      | \$ 492.56                             |
| DDITIONAL INFORMATION  | 111111        |                                | · · · · · · · · · · · · · · · · · · · |
| 0) Non-Monetary Gifts Given to Other Committees  | (CRO-1330)    | \$                             |                                       |
| 1) Outstanding Loans (incl. ones from other campaigns)   | (CRO-1430)    | \$                             |                                       |
| 2) Debts and Obligations owed By the Committee   | (CRO-1610)    | \$                             |                                       |
| 3) Debts and Obligations owed To the Committee   | (CRO-1620)    | \$                             |                                       |
| 4) Account Transfers Within the Committee  | (CRO-1720)    | \$                             |                                       |
| 5) Administrative Support  |               | \$                             | \$                                    |
| 6) Forgiven Loans  |               | \$                             | \$                                    |
| 7) 48-Hour Notice Reports Sum  |               | \$                             | \$                                    |
| B) Contributions to be Refunded  | _             | \$                             |                                       |
| RO-1100 NC State Board of Elections  | (CAU-1213)    | ψ                              | \$ August 2008                        |

Amendment Yes

 $\square$ 

No No

# **Contributions from Individuals**

| D |  |
|---|--|
|   |  |

|   | Ame     | adment |             |    |
|---|---------|--------|-------------|----|
| _ |         | Yes    | $\boxtimes$ | No |
|   | h a new |        |             |    |

Use this form to report individual contributions over \$50 or contributions under \$50 if form CPO 1205 is

| 1. Com      | mittee Full Nam        | e (and Fund if applie                          | cable)   |              |               |             | \$30 II Iorm (  | _           | Number        |            |
|-------------|------------------------|--|----------|--------------|---------------|-------------|-----------------|-------------|---------------|------------|
| Hardma      | in 4 Schools           |  |          |              |               |             |                 |             | 1             |            |
|             | ributor Informa        |  |          | Add          | Π             | Remo        | IVe             |             | 1             |            |
|             | ame, Mailing Addres    | s & Phone                                      |          | b. Job T     | itle/Prof     |             |                 | d. Com      | manta         |            |
|             | le city, state, & zip) |  | _        | Civil E      | Enginee       | er          |                 | u. com      | licitis       |            |
|             | Hardman                |  |          |              |               |             |                 |             |               |            |
|             | untscroft Lane         |  |          |              |               | ame/Spec    |                 |             |               |            |
| w inston    | a Salem, NC 2710       | 96   |          |              |               | Contrac     | ting            |             |               |            |
|             |                        |  |          | 236220       | )             |             |                 | e. Electi   | on Sum to Da  | te         |
|             |                        |  |          |              |               |             |                 | \$          | 1543.         | 0.8        |
| f. Prior    | g. Account Code        | h. Form of Payment                             | i In.    | Kind Descri  | ntinu         |             |                 |             |               |            |
|             | H4S                    |  |          |              |               |             | j. Date (mm/dd/ | уууу)       | k. Amo        | unt        |
|             | 1145                   | In Kind  | Self     | Ink'g Stm    | p             |             | 05/19           | 9/22        | \$            | 26.20      |
|             | H4S                    | Check  |          |              |               |             | 05/2            | 0/22        | <b>.</b>      |            |
| <b></b>     |                        |  | _        |              |               |             | 03/2            | 0/22        | \$            | 500.00     |
|             |                        |  |          |              |               |             |                 |             | \$            |            |
| 3. Contr    | ibutor Informat        | ion  |          | Add          | Π             | Remov       | 78              |             |               |            |
| a. Full Nai | me, Mailing Address    | & Phone  |          | b. Job Tit   |               |             |                 | d. Comm     |               |            |
|             | city, state, & zip)    |  |          | No Job       |               |             |                 | u. Comm     | ents          |            |
|             | Hardman                |  |          |              |               |             |                 |             |               |            |
|             | nberfield Drive        |  |          | c. Employ    | er's Na       | me/Specif   | ic Field        |             |               |            |
| Pfafftown   | n, NC 27040            |  |          | Not Em       |               |             |                 |             |               |            |
|             |                        |  |          |              |               |             |                 | e. Electio  | n Sum to Date | 2          |
|             |                        |  |          |              |               |             |                 |             | 800.00        |            |
| . Prior     | g. Account Code        | h Essen CD                                     | 1        |              |               |             |                 | \$          |               |            |
| <b></b>     |                        | h. Form of Payment                             | i. In-k  | ind Descrip  | tion          | j.          | Date (mm/dd/y   | ууу)        | k. Amou       | int        |
|             | H4S                    | Check  |          |              |               |             | 05/03/          | 22          | \$            | 600.00     |
|             |                        |  |          |              |               |             |                 |             |               |            |
|             |                        |  | -        |              |               |             |                 |             | \$            |            |
|             |                        |  |          |              |               |             |                 |             | \$            |            |
| . Contri    | butor Informatio       | on .   |          | Add [        |               | Remov       |                 |             |               |            |
|             | e, Mailing Address     |  |          | b. Job Title | l<br>e/Profee |             |                 | 1.0         |               | and survey |
| (include    | city, state, & zip)    |  |          | Civil En     |               | 5101        |                 | d. Comme    | nts           |            |
|             | Hardman                |  |          |              | 5             |             |                 |             |               |            |
|             | tscroft Lane           |  |          | c. Employe   | r's Nam       | e/Specific  | Field           | -           |               |            |
| Vinston S   | Salem, NC 27106        |  | Ĩ        | New Atla     |               |             |                 |             |               |            |
|             |                        |  |          | 236220       |               |             | U               | e. Election | Sum to Date   |            |
|             |                        |  |          |              |               |             |                 |             | 1543.98       |            |
| Prior       | g. Account Code        | L D. OD  |          |              |               |             |                 | \$          |               |            |
|             |                        | h. Form of Payment                             | i. In-Ki | nd Descripti | ion           | <b>j.</b> ] | Date (mm/dd/yy  | yy)         | k. Amou       | at         |
|             | H4S                    | In Kind  | GoDa     | ddy Email    | l             |             | 06/13/2         | 2           | \$            | 17.97      |
|             | H4S In Kind GoDad      |  | ddy Webs | ite          |               | 06/13/      | 22              | \$          | 29.99         |            |
|             |                        |  |          |              |               |             |                 |             | -             | 29.99      |
| Total       | only this Page         |  |          |              |               |             |                 | -           | \$            | 1174.16    |
|             | of ALL CRO-            |  | _        |              |               |             |                 | \$          |               | 11/4.10    |
|             |                        | •1210 <b>Pages</b><br>Detailed Summary Page Ch |          |              |               |             |                 | \$          |               | 1603.16    |
| I his lim - |                        |  |          |              |               |             |                 |             |               |            |

NC State Board of Elections

## **Contributions from Individuals**

| Pσ | 2 |
|----|---|

| An | nendment |
|----|----------|
|    | Ves      |

**Contributions from Individuals** Use this form to report individual contributions over \$50 or contributions under \$50 if for of <u>3</u> <u>Yes No</u>

| 1. Com            |   | (and Fund if applications |         |                            | bution     | sunde   | r \$50 II form CP  |                         |             |            |
|-------------------|---|---------------------------|---------|----------------------------|------------|---------|--------------------|-------------------------|-------------|------------|
| Hardman 4 Schools |   |                           |         |                            |            |         |                    | 2. ID Number            |             |            |
|                   |   |                           |         |                            |            |         |                    |                         | 1           |            |
|                   | ibutor Informati  |                           |         | Add                        |            | Rem     | nove               |                         | 1.21.2.1    |            |
|                   | me, Mailing Address   | & Phone                   |         | b. Job Tit                 |            | _       |                    | d. Commer               | nts         |            |
|                   | city, state, & zip)   |                           |         | Admiss                     | ions A     | ssista  | nt                 |                         |             |            |
| Neely Tu          | -   |                           |         |                            |            |         |                    |                         |             |            |
|                   | ellesley Pl Dr  |                           |         | c. Employ                  |            |         |                    |                         |             |            |
| Lewisvii          | le, NC 27023  |                           |         |                            | 1 Saler    | n Chr   | istian School      |                         |             |            |
|                   |   |                           |         | 611110                     |            |         |                    | e. Election             | Sum to Date |            |
|                   |   |                           |         |                            |            |         |                    | \$                      | 50.00       |            |
| f. Prior          | g. Account Code   | h. Form of Payment        | i. In-  | -Kind Descrip              | tion       |         | j. Date (mm/dd/yy  |                         | k. Amount   |            |
|                   | H4S   | anedot.com                | +       |                            | HUH        |         | 06/16/             |                         | \$          | 50.00      |
|                   |   |                           |         |                            |            |         | 00/10/             |                         |             | 50.00      |
|                   |   |                           |         |                            |            |         |                    |                         | \$          |            |
|                   |   |                           |         |                            |            |         |                    |                         | \$          |            |
|                   | ibutor Information  |                           |         | Add                        |            | Rem     | ove                |                         |             |            |
|                   | ne, Mailing Address   | & Phone                   |         | b. Job Titl                | e/Profe    | ssion   |                    | d. Commen               | ts          |            |
|                   | city, state, & zip)   |                           |         | Chapter                    | Coord      | inator  |                    |                         |             |            |
| Pat Black         |   |                           |         |                            |            |         |                    |                         |             |            |
|                   | dalwood Lane  |                           |         | c. Employe                 |            |         | cific Field        |                         |             |            |
| Winston           | Salem, NC 27106   |                           |         | Moms For Liberty<br>813410 |            |         |                    |                         |             |            |
|                   |   |                           |         |                            |            |         |                    | e. Election Sum to Date |             |            |
|                   |   |                           |         |                            |            |         |                    | \$                      | 250.00      |            |
| f. Prior          | g. Account Code   | h. Form of Payment        | i. In-l | Kind Descript              | ion        |         | j. Date (mm/dd/yy  | yy)                     | k. Amount   |            |
|                   | H4S   | anedot.com                |         |                            |            |         | 06/21/2            | 22                      | \$          | 250.00     |
|                   |   |                           |         |                            |            |         |                    |                         | \$          |            |
|                   |   |                           |         |                            |            |         |                    |                         | \$          |            |
| 3. Contri         | butor Informatio  | n                         |         | Add [                      |            | Remo    | ove                | _                       |             |            |
| a. Full Nan       | ne, Mailing Address &   | & Phone                   |         | b. Job Title               | <br>Profes |         |                    | d. Comment              | *           |            |
| (include          | city, state, & zip)   |                           |         | Board M                    |            |         |                    | Not Poste               |             |            |
| Dana Cau          | Idill Jones   |                           |         |                            |            |         |                    | Checking                |             |            |
| 600 Susar         | nna Ct  |                           |         | c. Employe                 | r's Nan    | ie/Spec | ific Field         | By 06/30/               |             |            |
| Kernersvi         | ille, NC 27284  |                           |         | WS/FC S                    | School     | s       |                    | 5                       |             |            |
|                   |   |                           |         | 923110                     |            |         |                    | e. Election S           | um to Date  |            |
|                   |   |                           |         |                            |            |         |                    | \$                      | 100.00      |            |
| f. Prior          | g. Account Code   | h. Form of Payment        | i. In-l | Kind Descripti             | ion        |         | j. Date (mm/dd/yyy | y)                      | k. Amount   |            |
|                   | H4S   | Check                     |         |                            |            |         | 6/27/2             | 2                       | \$          | 100.00     |
|                   |   |                           |         |                            |            |         |                    |                         | \$          |            |
|                   |   |                           |         |                            |            |         |                    |                         | \$          |            |
| 4. Total          | only this Page  | e                         |         |                            |            |         |                    | \$                      |             | 400.00     |
|                   | of ALL CRO  | 0                         |         |                            | 111        |         |                    | \$                      |             | 1603.16    |
|                   | the second se | Detailed Summary Page C   | RO-1100 | ))                         |            |         |                    | φ                       |             | 1003.10    |
| CRO-121           | 0   |                           |         | NC State Boa               | rd of Ele  | ections |                    |                         |             | April 2007 |

# **Contributions from Individuals**

| Amendment |             |    |
|-----------|-------------|----|
| Yes       | $\boxtimes$ | No |
|           |             |    |

Contributions from Individuals Pg = 3 of 3Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is a

|   |                          | (and Fund if applied    |          |                  | Ioution)  | s unde  | er \$50 II Iorin CR |                         |              |         |
|---|--------------------------|-------------------------|----------|------------------|-----------|---------|---------------------|-------------------------|--------------|---------|
| 1. Committee Full Name (and Fund if applicable) |                          |                         |          |                  |           |         |                     | 2. ID Number            |              |         |
| Hardman 4 Schools                               |                          |                         |          |                  |           |         |                     | 1                       |              |         |
|   | ibutor Informati         |                         |          | Add              |           | Rem     | nove                |                         |              |         |
|   | me, Mailing Address      | & Phone                 |          | b. Job T         | itle/Prof | ession  |                     | d. Commen               | ts           |         |
|   | city, state, & zip)      |                         |          | Realto           | r         |         |                     | Not Poste               | ed To Checki | ng      |
| Sandy El  |                          |                         |          |                  |           |         |                     | Account                 | By 06/30/22  | •       |
|   | llwood Street, Suit      |                         |          | c. Emple         | oyer's Na | ame/Spo | ecific Field        |                         | -            |         |
| Winston   | Salem, NC 27103          |                         |          |                  | Tate Re   | altors  |                     |                         |              |         |
|   |                          |                         |          | 53121            | 0         |         |                     | e. Election S           | Sum to Date  |         |
|   |                          |                         |          |                  |           |         |                     | \$                      | 25.00        | ~       |
| f. Prior  | g. Account Code          | h. Form of Payment      | i. In-I  | Kind Descr       | iption    |         | j. Date (mm/dd/yy   | yy)                     | k. Amount    |         |
|   | H4S                      | anedot.com              |          |                  |           | 0       | 6/30/2              | 22                      | \$           | 25.00   |
|   |                          |                         |          |                  |           |         |                     |                         | \$           |         |
|   |                          |                         |          |                  |           |         |                     |                         | \$           |         |
| 3. Contri                                       | ibutor Informatio        | )n                      |          | Add              | Π         | Rem     | love                |                         |              |         |
| a. Full Nan                                     | ne, Mailing Address d    | & Phone                 |          | b. Job T         | itle/Prof |         |                     | d. Comment              | ts           |         |
| (include  | city, state, & zip)      |                         |          | No Job           | Title     |         |                     |                         |              |         |
| Ed Hardr  | nan                      |                         |          |                  |           |         |                     |                         |              |         |
|   | nberfield Drive          |                         |          | c. Emplo         | yer's Na  | me/Spe  | cific Field         |                         |              |         |
| Pfafftown                                       | n, NC 27040              |                         |          | Not Er           | nploye    | ł       |                     |                         |              |         |
|   |                          |                         |          |                  |           |         |                     | e. Election Sum to Date |              |         |
|   |                          |                         |          |                  |           |         |                     | \$                      | 42.82        |         |
| f. Prior  | g. Account Code          | h. Form of Payment      | i. In-k  | L<br>Kind Descri | ption     |         | j. Date (mm/dd/yy   | уу)                     | k. Amount    |         |
|   | H4S                      |                         | Park     | iing             |           |         | 05/09/2             | 22                      | \$           | 4.00    |
|   |                          |                         |          |                  |           |         |                     |                         | \$           |         |
|   |                          |                         |          |                  |           |         |                     |                         | \$           |         |
| 3. Contri                                       | butor Informatio         | n                       |          | Add              |           | Rem     | ove                 |                         |              |         |
| a. Full Nan                                     | ne, Mailing Address &    | & Phone                 |          | b. Job Ti        | tle/Profe | ssion   |                     | d. Comments             |              |         |
| (include  | city, state, & zip)      |                         |          |                  |           |         |                     |                         |              |         |
|   |                          |                         |          | e Emplo          | vor's No  | ma/Sna  | cific Field         |                         |              | - 1     |
|   |                          |                         |          | c. Emplo         | yci sita  | mersper | chic Fielu          |                         |              |         |
|   |                          |                         |          |                  |           |         |                     | e. Election S           | um to Date   |         |
|   |                          |                         |          |                  |           |         |                     | \$                      |              |         |
| f. Prior  | g. Account Code          | h. Form of Payment      | i. In-K  | and Descri       | ption     |         | j. Date (mm/dd/yyy  | /у)                     | k. Amount    |         |
|   |                          |                         |          |                  |           |         |                     |                         | \$           |         |
|   |                          |                         |          |                  |           |         |                     |                         | \$           |         |
|   |                          |                         |          |                  |           |         |                     |                         | \$           |         |
|   | only this Page           |                         |          |                  |           |         |                     | \$                      |              | 29.00   |
| 5. Total  | of ALL CRO-              | -1210 Pages             |          |                  |           |         |                     | ¢                       |              | 1602.16 |
| (This line                                      | e must be on line 6 of 1 | Detailed Summary Page C | RO-1100) |                  |           |         |                     | \$                      |              | 1603.16 |
| CPO 111   | 0                        |                         |          |                  | _         |         |                     |                         |              |         |

CRO-1210

### **Disbursements**

Pg 1 Amendment Yes 

 $\boxtimes$ No

of <u>2</u> Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

|   | ull Name (and Fun        | d if applicable)     |                                    |                  | 2. ID Number                      |
|---|--------------------------|----------------------|------------------------------------|------------------|-----------------------------------|
| Hardman 4 Sch                             | ools                     |                      |                                    |                  | 1                                 |
| 3. Type of Disb                           | 1 00 1 / August          | se use separate C    | CRO-1310 forms for each t          | vpe of Disbursen | nent.)                            |
| Operating E                               |                          | Contributions to Ca  | ndidates/Political Committees      | Cc               | oordinated Party Expenditures     |
| 4. Payee Inform                           | nation                   |                      | Add 🗌                              | Remove           |                                   |
| a. Full Name, Mail                        | ing Address & Phone      |                      | b. Coordinated Committee N         | ame              | d. Comments                       |
| (include city, state,                     |                          |                      |                                    |                  |                                   |
| The Clemmons                              | Courier                  |                      |                                    |                  |                                   |
| 3600 Clemmon                              | s Road                   |                      | c. Level Registered (Specify)      |                  |                                   |
| PO Box 765                                |                          |                      | Federal X                          | County:          |                                   |
| Clemmons, NC                              | 27012-0765               |                      | State                              | Municipality:    | e. Election Sum to Date           |
|   |                          |                      |                                    |                  | tooo co                           |
|   |                          |                      |                                    |                  | \$ 1009.50                        |
| f. Account Code                           | g. Form of Payment       | h. Purpose Code      | i. Date (mm/dd/yyyy)               | j. Amount        | k. Required Remarks               |
| H4S                                       | Check                    | А                    | 05/03/22                           | \$1009.50        | Newspaper                         |
|   |                          | <b>A</b>             | 05/05/22                           | \$1009.30        | & Digital Ads                     |
|   |                          |                      |                                    | \$               |                                   |
| 4 Dames Inform                            |                          |                      | A 11                               |                  |                                   |
| 4. Payee Inform                           |                          |                      | Add  b. Coordinated Committee N    | Remove           | 1. Comments                       |
|   | ng Address & Phone       |                      | o. Coordinated Committee N         | ame              | d. Comments                       |
| (include city, state,<br>Carter Publishir |                          |                      | -                                  |                  |                                   |
| Kernersville Ne                           | - I F                    |                      | - T                                |                  | -                                 |
| PO Box 337                                | ws                       |                      | c. Level Registered (Specify)      |                  | -                                 |
| 300 East Mount                            | ain Otwart               |                      | Federal X                          | County:          |                                   |
|   |                          |                      | State                              | Municipality:    | e. Election Sum to Date           |
| Kernersville, No                          | 27285                    |                      |                                    |                  | \$ 1050.00                        |
| f. Account Code                           | g. Form of Payment       | h. Purpose Code      | i. Date (mm/dd/yyyy)               | j. Amount        | k. Required Remarks               |
| H4S                                       | Check                    | А                    | 05/20/22                           | \$1050.00        | Newspaper<br>Ads                  |
|   |                          |                      |                                    | \$               |                                   |
|   |                          |                      |                                    |                  |                                   |
| 4. Payee Inform                           |                          |                      | Add                                | Remove           |                                   |
| 160                                       | ng Address & Phone       |                      | b. Coordinated Committee Na        | ame              | d. Comments                       |
| (include city, state,                     | & zip)                   |                      |                                    |                  | Turlington                        |
| ANEDOT                                    |                          |                      |                                    |                  | Online Donation                   |
| 1340 Poydras St                           | treet                    |                      | c. Level Registered (Specify)      |                  | -                                 |
| Suite 1770                                | 4 70110                  |                      | Federal 🛛                          | County:          |                                   |
| New Orleans, L                            | A /0112                  |                      | State                              | Municipality:    | e. Election Sum to Date           |
|   |                          |                      |                                    |                  | \$ 13.90                          |
| f. Account Code                           | g. Form of Payment       | h. Purpose Code      | i. Date (mm/dd/yyyy)               | j. Amount        | k. Required Remarks               |
| H4S                                       | Direct Debit             | С                    | 06/16/22                           | \$2.30           | Fee For Online<br>Donation        |
|   |                          |                      |                                    | \$               |                                   |
| 5. Total only thi                         | is Page                  |                      |                                    | 1                | \$ 2061.80                        |
|   | CRO-1310 Pages           |                      |                                    |                  |                                   |
| (This line goes in                        | line 13a of Detailed Sun |                      |                                    |                  | \$ 2076.04                        |
| (This line goes in                        | line 13b of Detailed Sun | mary Page CRO-1100   | ) if Contrib to Candidates/Politic | al Comm)         | \$ 2076.04                        |
| (This line goes in                        | line 13c of Detailed Sum | mary Page CRO-1100   | ) if Coordinated Party Expenditu   | res)             |                                   |
| 7. Purpose Code                           | es (List detailed exp    | enditure code in     | (h.) above)                        |                  |                                   |
| A* - Media                                | B* - Printing            | C* - Fund            | Iraising                           | D - To Anoth     | er Candidate                      |
| E - Salaries                              | F* - Equipment           | G - Politic          |                                    |                  | Public Office Expenses            |
| I - Postage                               | J - Penalties            | K* - Offic           | e Expenses                         | Q* - Donatio     | n to Legal Expense Fund           |
| O* - Other                                | a datailad and land      | on the second of the | manles (2.1.) (1.)                 |                  |                                   |
| Coues require                             | e detailed explanati     | on in required re    | marks neld (k)                     |                  | a dealer and a second a second as |

### **Disbursements**

Pg 2 Amendment Yes

 $\boxtimes$ No

of <u>2</u> Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

| 1. Committee F  | ull Name (and Fun  |   |                          |             |                  | 2. ID Number                             |
|---|--|---|--------------------------|-------------|------------------|--|
| Hardman 4 Sch   |  |   |                          |             |                  | 1  |
| 3. Type of Disb   | and the second sec |   | RO-1310 forms for        |             |                  |  |
| Operating E   |  | Contributions to Ca   | ndidates/Political Commi | ttees       |                  | ordinated Party Expenditures             |
| 4. Payee Inform   |  |   | Add                      |             | Remove           |  |
|   | ing Address & Phone  |   | b. Coordinated Com       | nittee Na   | ame              | d. Comments                              |
| (include city, state,   | & zip)   |   | -                        |             |                  |  |
| GoDaddy   |  |   |                          | _           |                  | _  |
| 1402 E.Buckey   |  |   | c. Level Registered (S   | -           |                  | _  |
| Phoenix, AZ 85  | 034  |   | Federal                  | $\boxtimes$ | County:          |  |
| ų.  |  |   | State                    |             | Municipality:    | e. Election Sum to Date                  |
|   |  |   |                          |             |                  | \$ 2.64                                  |
| f. Account Code   | g. Form of Payment   | h. Purpose Code   | i. Date (mm/dd/yy        | yy)         | j. Amount        | k. Required Remarks                      |
| H4S   | Direct Debit   | К   | 05/17/22                 |             | \$2.64           | Domain                                   |
|   |  |   |                          |             |                  | Fee                                      |
|   |  |   |                          |             | \$               |  |
| 4. Payee Inform   | ation  |   | Add                      |             | Remove           |  |
|   | ng Address & Phone   |   | b. Coordinated Comm      | nittee Na   | ame              | d. Comments                              |
| (include city, state,   | & zip)   |   |                          |             |                  | Blackburn                                |
| ANEDOT  |  |   |                          |             |                  | Online Donation                          |
| 1340 Poydras S  | treet  |   | c. Level Registered (S   | pecify)     |                  |  |
| Suite 1770  |  |   | Federal                  | $\boxtimes$ | County:          |  |
| New Orleans, L  | A 70112  |   | State                    |             | Municipality:    | e. Election Sum to Date                  |
|   |  |   |                          |             |                  | \$ <sup>13.90</sup>                      |
| f. Account Code   | g. Form of Payment   | h. Purpose Code   | i. Date (mm/dd/yy        | yy)         | j. Amount        | k. Required Remarks                      |
| H4S   | Direct Debit   | с   | 06/21/22                 |             | \$10.30          | Fee For Online                           |
|   |  |   |                          |             | +                | Donation                                 |
|   |  |   |                          |             | \$               |  |
| 4. Payee Inform   | ation  |   | Add                      |             | Remove           |  |
| a. Full Name, Maili   | ng Address & Phone   |   | b. Coordinated Comn      | nittee Na   | ime              | d. Comments                              |
| (include city, state,   | & zip)   |   |                          |             |                  | Elliott Donatio                          |
| ANEDOT  |  |   |                          |             |                  | Not Posted To                            |
| 1340 Poydras S  | treet  |   | c. Level Registered (S   | pecify)     |                  | Checking Acct                            |
| Suite 1770  |  |   | Federal                  | $\boxtimes$ | County:          | By 06/30/22                              |
| New Orleans, L  | A 70112  |   | State                    |             | Municipality:    | e. Election Sum to Date                  |
|   |  |   |                          |             |                  | \$ 13.90                                 |
| f. Account Code   | g. Form of Payment   | h. Purpose Code   | i. Date (mm/dd/yy        | yy)         | j. Amount        | k. Required Remarks                      |
| H4S   | Direct Debit   | С   | 06/30/22                 |             | \$1.30           | Fee For Online<br>Donation               |
|   |  |   |                          |             | ¢.               | Not Posted To                            |
|   |  |   |                          |             | \$               | Acct By 6/30/22                          |
| 5. Total only th  |  |   |                          |             | يربع ور وال آت و | \$ 14.24                                 |
| An a contract of dealers of   | CRO-1310 Pages   |   |                          |             |                  |  |
|   | line 13a of Detailed Sun   |   |                          |             |                  | \$ 2076.04                               |
|   | line 13b of Detailed Sun   |   |                          |             |                  |  |
|   | line 13c of Detailed Sum   | the second se |                          | cpenditu    | res)             |  |
|   | es (List detailed ex   |   |                          |             | <b>ID ID 1 1</b> |  |
| A* - Media<br>E - Salaries  | B* - Printing<br>F* - Equipment  | C* - Fund<br>G - Politic  |                          |             | D - To Anoth     | er Candidate<br>g Public Office Expenses |
| I - Postage   | J - Penalties  |   | ce Expenses              |             |                  | on to Legal Expense Fund                 |
| O* - Other  | - A VIMITIVD   | ik - Olik   | Tabaraoa                 |             | × - Donatio      | a to moder maloutor rang                 |
| the second se | e detailed explanati   | ion in required re  | emarks field (k)         |             |                  |  |
| CRO-1310  |  | NC S  | State Board of Elections |             |                  | December 2009                            |

## **In-Kind Contributions**

**IN-KING CONTRIBUTIONS** Pg <u>1</u> of <u>1</u> <u>Yes</u> 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.

Amendment

 $\boxtimes$ 

No

| Use CRO-1215 II In-Kind Contributions were of will be refun      | ded within /         | days.                  |                         |                       |  |
|--|----------------------|------------------------|-------------------------|-----------------------|--|
| 1. Committee Full Name (and Fund if applicable)                  |                      |                        | 2. ID Number            |                       |  |
| Hardman 4 Schools  |                      |                        |                         | 1                     |  |
|  | _                    |                        |                         |                       |  |
| 3. Contributor Information Add                                   | Remove               |                        |                         |                       |  |
| a. Full Name, Mailing Address & Phone                            |                      | b. Type of Contributor |                         | c. Comments           |  |
| (include city, state, & zip)                                     |                      |                        |                         |                       |  |
| Michael Hardman  |                      | Candidate              |                         |                       |  |
| 4013 Huntscroft Lane   |                      | arty                   |                         |                       |  |
| Winston Salem, NC 27106  |                      | AC<br>Leferendum       |                         |                       |  |
|  |                      |                        | d. Election Sum to Date |                       |  |
|  |                      | ther Receipt Source    | \$                      | 1543.98               |  |
| e. Description   |                      | f. Date (mm/dd/yy      | yy)                     | g. Fair Market Amount |  |
| Self Inking Stamp  |                      | 5/19/22                |                         | \$ 26.20              |  |
| Go Daddy Fee Email Essentials Renewal                            |                      | 06/13/22               |                         | \$ 17.97              |  |
| GoDaddy Fee Website Renewal                                      |                      |                        |                         |                       |  |
|  |                      | 06/13/22               |                         | \$ 29.99              |  |
| 3. Contributor Information Add                                   | Remove               |                        |                         |                       |  |
| a. Full Name, Mailing Address & Phone                            | b. Type o            | f Contributor          | c. Com                  | aments                |  |
| (include city, state, & zip)                                     | Ы                    | Individual             |                         |                       |  |
| Ed Hardman   |                      | andidate               |                         |                       |  |
| 4424 Timberfield Drive   |                      | arty                   |                         |                       |  |
| Pfafftown, NC 27040  |                      | AC                     |                         |                       |  |
|  |                      | eferendum              | d. Elec                 | ction Sum to Date     |  |
|  | Other Receipt Source |                        |                         |                       |  |
|  |                      | and accorpt Source     | \$ 42.82                |                       |  |
| e. Description   | _                    | f. Date (mm/dd/yy)     | (y)                     | g. Fair Market Amount |  |
| Parking Fee To Deliver First Quarter Plus Draft                  |                      |                        |                         |                       |  |
|  |                      | 05/09/22               |                         | \$ 4.00               |  |
|  |                      |                        |                         | \$                    |  |
|  |                      |                        |                         | \$                    |  |
| 3. Contributor Information Add                                   | Demesse              | The second second      | _                       | -                     |  |
| a. Full Name, Mailing Address & Phone                            | Remove               | Contributor            | . Cam                   |                       |  |
| (include city, state, & zip)                                     |                      | dividual               | c. Com                  | intents               |  |
| (monute city) states et apy                                      | Candidate            |                        |                         |                       |  |
|  |                      | androate<br>arty       |                         |                       |  |
|  |                      | AC                     |                         |                       |  |
|  |                      | eferendum              | 4 171                   | them One to Date      |  |
|  |                      |                        | a. Elec                 | tion Sum to Date      |  |
|  |                      | Other Receipt Source   |                         | \$                    |  |
| e. Description   |                      | f. Date (mm/dd/yyy     | y)                      | g. Fair Market Amount |  |
|  |                      |                        |                         | \$                    |  |
|  |                      |                        |                         | ф<br>                 |  |
|  |                      |                        |                         | \$                    |  |
|  |                      |                        |                         | \$                    |  |
| 4. Total only this Page  |                      |                        | \$                      | 78.16                 |  |
| 5. Total of ALL CRO-1510 Pages                                   |                      |                        |                         |                       |  |
| (This line must be on line 17 of Detailed Summary Page CRO-1100) |                      |                        | \$                      | 78.16                 |  |
| CRO-1510 NC State Board of Elections                             |                      |                        |                         | December 2007         |  |