Disclosure Re	port Cover						Amendment  Yes No			
Use this form for ge	this form for general report and committee information, must be signed and submitted along with on to update information									
Do not use uns torn	to update information						outer detailed forms.			
1. Committee Infor a. Full Name	mation									
Committee to Elect	Dhil Carter						c. ID Number			
							BCQH92			
b. Mailing Address (incl PO Box 26781	ude City, State and Zip Code)						d. Date Filed			
Winston Salem, NC	27114						05/10/2022			
							e. Phone Number			
							(336) 577-7202			
2. Report Year	3. Period Start Date (mm/c	dd/yy)	4. Period (mm/dd/yy)		ite	5. Treasurer Fu	ıll Name			
2022	01/01/2022		04/2	20/2022		Quinn Coleman				
6. Type of Committee		9. Type	e of Report	t (c	heck on	ly one type of repo	ort from one category)			
Candidate Campa PAC		Municipa			State/C	ounty	Referendum			
Independent	Referendum	l —	Organizationa	d		Organizational	Organizational			
Expenditure Legal Expense Fu	Joint Fundraiser		Thirty-five da	У	(	Quarterly	Pre-referendum			
7. Type of Fund	(if applicable, check one)		Pre-primary			First	D Pinet			
Booster Fund"		1 =	Pre-election		H	Second	Final Supplemental Final			
Building Fund			Pre-runoff			Third	Annual			
		· ·	Semi-annual			Fourth	Special			
Other:		님	Mid Year		S	Semi-annual				
		님 .	Year End Final	1	님	Mid Year	10. Special Report Name			
8. Number of Fundra	aisers this Report	1=	Special		⊢ F	Year End inal				
	0					pecial	2			
11. Account Informa						nformation	22 50			
a. Financial Institution Fu Truliant Federal Cred				a. Finan	cial Instit	tution Full Name	# 5 7			
b. Purpose	c. Account Code			b. Purp	ng o					
for all				o. rurp	ose		c. Account Code			
campaign	A744						watered to the second to the s			
expenses	d. Period Begin Balance						d. Period Begin Balance			
	\$ 0.00						\$ 60			
CERTIFICATION										
Contoral Dutter	correct and that I have been	шшигиес	i with brohi	inited or	Other no	on-disolosed funda	, & 22D-22M of Chapter 163 of a. I further certify that this report			
Quinii Colein	Printed Name of Signer		<u> </u>	مے کر			05/10/2022			
FOR OFFICE USE ON			SIE	gnature of	Appointed	d Treasurer	Date			
Date Received:		E	mployee:				Delivery Method Normal Mail			
Date Postmarked:		Eı	mployee:				Registered Mail Hand Delivered			
Date Scanned:		Eı	mployee:				Electronically Filed Signer has not received			
Date Data Entered	:	Eı	mployee:				mandatory training			
	form cannot be used to ame custodian of our must amend the Statement	1 OI DOOKS	sinformatio	on, or ac	count in	formation.	ess, treasurer, assistant treasurer,			

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

1. Committee Full Name (and Fund if and lively livel

Amendment  $\boxtimes$ Yes No

Committee Full Name (and Fund if applicable)  Committee to Elect Phil Carter	2. Type of Repor	t	3. ID Number
	first quarter plus		BCQH92
Start of Election Cycle: January 1,	2022	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0.00	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 835.77	\$ 835.77
6) Contributions from Individuals	(CRO-1210)	\$ 4187.00	\$ 4187.00
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 Organization	ns (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)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	11d and 11e)	\$ 5022.77	\$ 5022.77
EXPENDITURES 13) Disbursements			
13a) Operating Expenditures  13b) Contributions to Candidates/Political Committee	(CRO-1310)	\$ 1337.18	\$ 1337.18
, sale and a sale and	ees (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)	\$ 1597.00	\$ 1597.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		\$ 2,934.18	\$ 2934.18
19) Cash on Hand at End (Add lines 4 and 12 together, then subtra	ct line 18)	\$ 2088.59	\$ 2088.59
ADDITIONAL INFORMATION  20) Non-Monetary Gifts Given to Other Committees			
		\$	
o ( === t== t om tener tumpaigns)		\$	
g and a solution of the committee		\$	
Debts and Obligations owed To the Committee		\$	
4) Account Transfers Within the Committee	-	\$	
5) Administrative Support		\$	\$
6) Forgiven Loans	(CRO-1440)	\$	\$
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
8) Contributions to be Refunded	(CRO-1215)	\$	\$
RO-1100 NC State Board - STillert's			

Page

of

Amendment

Yes 🖂

No

Committee to Fi	lect Phil Carter	nd if applicable)			2. I	D Number
						BCQH92
3. Contributor 1						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/y	vvv)	f. Amount
Add Remove	A7445	Cash		03/13/		\$ 20.00
Add Remove	A7445	Cash		03/09/	2022	\$ 50.00
Add Remove	A7445	Cash		04/02/		\$ 20.00
Add	A7445	Cash				
Remove Add	A7445	Cash		04/02/		\$ 10.00
Remove Add				04/02/	2022	\$ 10.00
Remove Add	A7445	Cash		04/02/2	2022	\$ 10.00
Remove	A7445	Cash		04/02/2	2022	\$ 10.00
Add Remove	A7445	Cash		04/02/2	2022	\$ 5.00
Add Remove	A7445	Cash		04/02/2	2022	\$ 5.00
Add Remove	A7445	Cash		04/02/2		\$ 10.00
Add	A7445	Cash				
Remove Add	A7445			04/02/2		\$ 2.00
Remove Add		Cash		04/02/2	022	\$ 40.00
Remove Add	A7445	Cash		04/02/2	022	\$ 10.00
Remove	A7445	Cash		04/02/2	022	\$ 20.00
Add Remove						\$
Add Remove						\$
Add				-		
Remove Add						\$
Remove Add						\$
Remove						\$
Add Remove						\$
Add Remove						\$
Add						
Remove						\$
Total only th					\$	222.00
	CRO-1205 Pa	nges nmary Page CRO-1100)			\$	835.77

Page

of 4

2

Amendment

Yes

No

			d if applicable)			2. ID	Number
	ittee to Elect P						BCQH92
3. Con	tributor Infori	mation					
a. Amen		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yy)	y)	f. Amount
	Add Remove	A7445	Electronic		04/01/2	022	\$ 15.00
	Add Remove	A7445	Electronic		04/02/2	022	\$ 35.00
	Add Remove	A7445	Electronic		04/02/2	022	\$ 25.00
	Add Remove	A7445	Electronic		04/02/2	022	\$ 25.00
	Add Remove	A7445	Electronic		04/02/2	022	\$ 25.00
	Add Remove	A7445	Electronic		04/02/2	022	\$ 10.00
Ħ-	Add Remove	A7445	Electronic		04/02/2	022	\$ 15.00
<u> </u>	Add Remove	A7445	Electronic		04/02/2	022	\$ 20.00
Ä	Add Remove	A7445	Electronic		04/02/2	022	\$ 25.00
	Add Remove	A7445	Electronic		04/02/2022		\$ 15.00
<u> </u>	Add Remove	A7445	Electronic		04/02/2022		\$ 10.00
Ħ.	Add Remove	A7445	Electronic		04/02/2022		\$ 20.00
	Add Remove	A7445	Electronic		04/02/202		\$ 10.00
	Add Remove	A7445	Electronic		04/03/20	022	\$ 25.00
	Add Remove	A7445	Electronic		04/04/20	022	\$ 25.00
	Add Remove	A7445	Electronic		04/04/20	022	\$ 10.00
	Add Remove	A7445	Electronic		04/04/20	)22	\$ 25.00
	Add Remove	A7445	Electronic		04/05/20		\$ 35.00
	Add	A7445	Electronic		04/05/20		\$ 25.00
	Add	A7445	Electronic		04/08/20		\$ 25.00
	Remove Add	A7445	Electronic		04/12/20		
Add A7445 Electronic 04/12							
	Remove		TYANK OTHA		04/12/20	144	\$ 1.00
	al only this F					\$	423.94
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)  \$ 835.77						835.77	

Page

<u>3</u> of

Amendment

Yes

No

			nd if applicable)			2. II	Number
Com	mittee to Elect	Phil Carter					BCQH9213
3. Co	ntributor Info	rmation					10-1-2-10
a. Ame		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy	y)	f. Amount
<u> </u>	Add	A7445	Electronic		04/12/20		\$ 10.00
Ц	Remove	11,115	Eloudino		04/12/20	122	\$ 10.00
	Add	A7445	Electronic		04/13/20	122	\$ 10.00
<u>H</u>	Remove Add				04/15/20	724	3 10.00
H	Remove	A7445	Electronic		04/13/20	)22	\$ 25.00
H	Add						
H	Remove	— A7445	Electronic		04/13/20	\$ 1.00	
$\Box$	Add						
	Remove	A7445	Electronic		04/13/20	)22	\$ 1.00
	Add						
	Remove A7445 Electronic 0					22	\$ 1.00
	Add	A7445	Electronic		0.4/1.0/0.0		
	Remove	A/443	Electronic		04/13/20	122	\$ 2.00
$\sqcup$	Add	A7445	Electronic		04/14/20	າວວ	\$ 5.89
<u> </u>	Remove				04/14/20		\$ 3.09
<u>H</u>	Add A7445 Electronic 0					22	\$ 1.76
$\vdash$	Remove Add		· · · · · · · · · · · · · · · · · · ·		0 17 11 20		Ψ 1.70
H	Remove	A7445	Electronic		04/14/20	22	\$ 1.00
H	Add	+					
$\vdash$	Remove	A7445	Electronic		04/15/20	22	\$ 5.00
П	Add						
	Remove	A7445	Electronic		04/15/2022		\$ 1.00
	Add	A 77.445	T31				
	Remove	A7445	Electronic		04/15/20	22	\$ 10.00
	Add	A7445	Electronic		04/16/00	22	
	Remove	A/THS	Biccuome		04/16/20	22	\$ 3.00
	Add	A7445	Electronic		04/16/20	22	\$ 2.00
	Remove				04/10/20		\$ 2.00
H	Add	A7445	Electronic		04/17/20	22	\$ 1.00
	Remove Add	-			0 11 11 20		Ψ 1.00
H	Remove	A7445	Electronic		04/19/202	22	\$ 1.00
	Add						
	Remove	A7445	Electronic		04/20/202	22	\$ 2.00
	Add	A 77.4.4.5	T31				
	Remove	A7445	Electronic		04/24/202	22	\$ 35.00
	Add	A7445	Electronic		04/05/05	20	Δ 0.05
	Remove	A/743	Electronic		04/25/202	22	\$ 8.82
	Add A7445 Electronic 0					22	¢ 500
Kemove Vu211							\$ 5.88
<u> </u>	Add	A7445	Electronic		03/28/202	22	\$ 5.00
4 (**)	Remove				03/20/20/2		Ψ 5.00
4. Total only this Page						\$	138.35
5. Total of ALL CRO-1205 Pages							007.77
(This line must be on line 5 of Detailed Summary Page CRO-1100)						\$	835.77

Page

<u>4</u> of <u>4</u>

Amendment

Yes

No

	1. Committee Full Name (and Fund if applicable)  Committee to Elect Phil Carter  2. ID Number									
Cor	Committee to Elect Phil Carter  BCQH92									
3. C	ontributor Info	mation				1				
a. An		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yy	uv)	f. Amount			
	Add	A7445	Electronic	Description			0 500			
	Remove	71743	Electronic		03/28/2	2022	\$ 5.00			
H	Add	A7445	Electronic		03/30/2	2022	\$ 6.48			
H	Remove				03/30/2		0.10			
Н	Remove	A7445	Electronic		03/30/2	2022	\$ 10.00			
	Add	17445	The state of the s			02/20/2022				
	Remove	A7445	Electronic		03/30/2	2022	\$ 5.00			
	Add	A7445	Electronic		03/31/2	ທາວວ	\$ 25.00			
	Remove	117.110	- Industrial		03/31/2	.022	\$ 25.00			
H	Add Remove	A7445	Electronic				\$			
Н	Add									
Ħ	Remove	A7445	Electronic				\$			
	Add	15115	T1							
	Remove	A7445	Electronic				\$			
	Add	A7445	Electronic				<b>.</b>			
Ц	Remove	A7443 Electronic					\$			
H	Add	A7445	Electronic				\$			
	Remove Add						Ψ			
H	Remove	A7445	Electronic				\$			
Ħ	Add									
	Remove	A7445	Electronic				\$			
	Add	A7445	Electronic							
	Remove	A/TTS	Diccuonic				\$			
	Add Remove	A7445	Electronic				\$			
	Add Remove	A7445	Electronic				\$			
	Add	A7445	Elaston.							
	Remove	A7445	Electronic				\$			
4	Add	A7445	Electronic				\$			
H	Remove Add			_			¥			
	Remove	A7445	Electronic				\$			
П	Add	l								
	Remove	A7445	Electronic				\$			
	Add	A7445	Electronic							
	Remove	T.ITHJ	Piccholic				\$			
Add A7445 Electronic						\$				
□ Add						*				
H	Remove	A7445	Electronic				\$			
4. T	otal only this	Page				\$	51.48			
	5. Total of ALL CRO-1205 Pages									
	This line must be on line 5 of Detailed Summary Page CRO-1100)  \$ 835.77									

<b>Disbursem</b> Use this form to	report expenditures	from the committee	ee for; operating exper	Pg <u>1</u> ises, contributi	of <u>8</u>	Amendment Yes idate/political	⊠ No
committees and	coordinated party e	xpenditures.				•	
	Full Name (and Fur	d if applicable)				2. ID Number	r
	Elect Phil Carter					BCQH	<del>1</del> 92
3. Type of Dish			RO-1310 forms for ea		bursement.)		
Operating I		Contributions to Car	ndidates/Political Committee	s	] Coordina	ated Party Expenditure	s
4. Payee Inform	nation		Add	Remove			
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committ	ee Name	d. 0	Comments	
(include city, state,							
Flores Screen P							
1155 Shattalon	•		c. Level Registered (Spec	cify)			
Winston Salem	, NC 27105		Federal [	County:			
			State [	Municipal	ity: e. F	Election Sum to Date	
					\$	232.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. I	Required Remarks	
A7445	Cash	0	03/12/2022	\$126.00	scr	reen printed	
A7445	Cash	О	04/28/2022	\$106.00	scr	reen printed	
4. Payee Inform	nation		Add	Remove			
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee		d. (	Comments	
include city, state,	& zip)						
Next Digital Pri							
4513 Thacker H	Iill Dr		c. Level Registered (Spec	ify)			
Winston Salem,	NC 27106		Federal [	County:			
			State F	Municipali	tv: e.E	Election Sum to Date	
					\$	689.00	
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. R	Required Remarks	
A7445	debit card	В	04/01/2022	\$689.00		d signs	
				\$			
. Payee Inform	otion		A 44				
			Add Coordinated Committee	Remove	1.0		
	ng Address & Phone		D. Coordinated Committee	e Name	a. C	Comments	
include city, state, Hot Cards	& ZIP)						
22 North Main S	Stroot		a I and Dariet and (Committee				
Floor 2	Succi		c. Level Registered (Speci				
Chagrin Falls, C	N.: 44022		Federal _	County:			
Chagrin Falis, C	лно 44022		State	Municipali		lection Sum to Date 348.48	
Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	i. Amount			
			, , , ,	j. Amount		Required Remarks or cards	
A7445	debit card	В	04/07/2022	\$348.48	doc	n cards	
				\$			
. Total only thi	- Int				\$	1269.48	
	CRO-1310 Pages						
	line 13a of Detailed Sun Jine 13h of Detailed Sun		if Operating Expenses)	litical Commi	\$	1337.18	

O\* - Other \* Codes require detailed explanation in required remarks field (k) CRO-1310

A\* - Media

E - Salaries

I - Postage

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

C\* - Fundraising

G - Political Party

K\* - Office Expenses

7. Purpose Codes (List detailed expenditure code in (h.) above)

B\* - Printing

F\* - Equipment
J - Penalties

D - To Another Candidate

H\* - Holding Public Office Expenses

Q\* - Donation to Legal Expense Fund

# Disbursements Pg 2 of 2 Yes Amendment Yes

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

	full Name (and Fun	d if applicable)						2. ID Number		
Committee to E	Committee to Elect Phil Carter BCQH92									
3. Type of Disb	ursement (Plea	ise use separate (	CRC	0-1310 forms for each	type	of Disburse	ment.)			
Operating B				lates/Political Committees				d Party Expenditures		
4. Payee Inform	nation		A	\dd \	F	Remove				
a. Full Name, Mail	ing Address & Phone		b	. Coordinated Committee I			d. Co	mments		
(include city, state,										
Michael's	py		1							
1050 Hanes Ma	ll Blvd		C	Level Registered (Specify)	7)					
Winston Salem			F	Federal		County:	-			
Transcent Seatoning	, 110 27 103		۱'n	State		funicipality:	a Fla	ction Sum to Date		
			-		14	rumcipanty.	C. E.IC	ction Sum to Date		
							\$ 6	57.70		
f. Account Code	g. Form of Payment	h. Purpose Code	1	i. Date (mm/dd/yyyy)	j.	Amount	k. Re	quired Remarks		
A4775	debit card	0	04/29/2022			67.70	tshir	ts		
A4773	deon card	О	04/28/2022 \$67.70			67.70	for p	rinting on		
					\$					
100	L		_							
4. Payee Inform			-	dd		temove	1			
	ing Address & Phone		D.	Coordinated Committee N	Name		d. Co	mments		
(include city, state,	& zip)		-							
			-	T 173 1 . 1/0 . 10			-			
			c.	Level Registered (Specify)						
	Federal County:									
State Municipality: e. Election Sum to Date										
							\$			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j.	k. Rec	juired Remarks			
					\$					
					\$					
4 70 7 6			_							
4. Payee Inform			_	dd 🔲		emove	_			
	ng Address & Phone		b.	Coordinated Committee N	Name		d. Cor	nments		
(include city, state,	& zip)									
			_							
			c.	Level Registered (Specify)	)					
				Federal	C	ounty:				
				State	M	lunicipality:	e. Elec	ction Sum to Date		
							\$			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j.	Amount	k. Req	uired Remarks		
					\$					
					\$					
5. Total only thi							\$	67.70		
	CRO-1310 Pages									
	line 13a of Detailed Sum		_	/			\$	1337.18		
				Contrib to Candidates/Politic		omm)	1	1557110		
			_	Coordinated Party Expendite	tures)		1			
	es (List detailed exp									
A* - Media E - Salaries	B* - Printing	C* - Fund				D - To Anot				
I - Postage	F* - Equipment J - Penalties	G - Politic K* - Offic						Office Expenses		
O* - Other	o - 1 chances	A - OIII	ئال ب	vh-11363		A Dousti	បព ល L/ <b>e</b> [	gal Expense Fund		
	Codes require detailed explanation in required remarks field (k)									

 $\boxtimes$ 

No

		m Individuals		0	L 4	Pg	1 of	10	Yes	No
		ividual contributions (and Fund if applica		or contri	bution	s unde	er \$50 if form CR			
			ibic)					2. ID Nu		
Comittee	e to Elect Phil Car	ter 							BCQH92	
	ibutor Informati			Add		Rem	nove			
	me, Mailing Address	& Phone		b. Job Tit	tle/Profe	ession		d. Comme	nts	
Ernestine	city, state, & zip)			retired						
	orningside Dr			c. Employ	verte Ne	me/Sn	ecific Field			
	Salem, NC 27106	I		retired	yel 314a	шоор	teme Field	-		
	-						2 <sub>521</sub>	e. Election	Sum to Date	
								\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-I	Kind Descrip	ation		j. Date (mm/dd/y)		k. Amount	
	A7445	check	1	The state of the s	Jeno II		04/19/2			150.00
[]	127712	CHOCK					04/19/2	.022	\$	150.00
									\$	
									\$	
	ibutor Informatio			Add		Rem	ove		i i i i i	
	nc, Mailing Address	& Phone		b. Job Tit	le/Profe	ssion		d. Commen	its	
	city, state, & zip)			retired						
Jerome A	Adams Banner Ave			. 10			14 77	_		
	Salem, NC 27127			retired	er's Nai	ne/Spe	cific Field	-		
VI IIISCON	outem, 140 27127			retired				e Election S	Sum to Date	
	1							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	kind Descrip	tion		j. Date (mm/dd/yy	уу)	k. Amount	
	A7445	check					04/11/20	022	\$	100.00
									\$	
									\$	
3. Contri	butor Informatio	n		Add		Reme	ove			
	ne, Mailing Address é	k Phone		b. Job Titl	e/Profes	sion		d. Commen	ts	
	city, state, & zip)			retired						
Paula Tra 845 Knol										
	Salem, NC 27103			c. Employer	er's Nan	ae/Spec	cific Field			
W IIISTOII	Saicin, 14C 27103			Termen				e. Election S	Sum to Date	
								\$	75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descript	tion		j. Date (mm/dd/yy)	vv)	k. Amount	
	A7445	check					03/28/20		\$	75.00
									\$	
									\$	
4. Total	only this Page			9 3				\$		325.00
5. Total	of ALL CRO-	1210 Pages								
(This line	must be on line 6 of 1	Detailed Summer Day O	DO 1100					\$		4187.00

Amendment

Contr	ibutions fro	m Individuals				Pg	2 of	10	Amendmer Yes	-
Use this	form to report inc	dividual contributions	over \$5	0 or con	tribution					
1. Com	nittee Full Name	(and Fund if applica	able)					2. ID Nu	mber	
committe	ee to elect phil ca	rter							ВСОН92	
3. Contr	ibutor Informat	ion		Add		Remov	/e			
	me, Mailing Address	& Phone		b. Job	Title/Prof	ession		d. Comme	nts	
-	city, state, & zip)			unen	ployed					
Matthew	roster andiles Dr							1		
	Salem, NC 27101	1			oloyer's Na	ame/Specif	ic Field	-		
Whiston	Sulcin, 14C 27101	L		unen	ployed			a Floation	Sum to Date	
									Sum to Date	
								\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description j. Date (mm/dd/y				/уу)	k. Amount	
	A7445	check					04/08/2	022	\$	150.00
									\$	
									\$	
3. Contr	ibutor Informati	on		Add		Remov	e		16	
a. Full Nar	ne, Mailing Address	& Phone		b. Job	Title/Profe	ession		d. Commen	ts	-
	city, state, & zip)			retire	d					
Willie Gr										
	rningside Dr				loyer's Na	me/Specifi	c Field			
WINSTON	Salem, NC 27106	)		retire	d					
								e. Election S	Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Desc	ription	j.	Date (mm/dd/yy	уу)	k. Amount	
	A7445	check					04/19/20	022	\$	100.00
									\$	
									\$	
	butor Information			Add		Remove	e			
	e, Mailing Address	& Phone		b. Job 7	litle/Profe	ssion		d. Commen	ts	
(include	city, state, & zip)			-						
				c. Empl	oyer's Nar	me/Specific	Field			
				C) Zinpi	oyer BINAL	meropeem	ricid			
								e. Election S	um to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descr	iption	j.	Date (mm/dd/yy)	/y)	k. Amount	
									\$	
									\$	
									\$	
4. Total	only this Page	e				1024		\$		250.00
	of ALL CRO									
		Detailed Summan Page C	PO 1100					\$		4187.00

Amendment

Yes No

		m Individuals		P	<u>3</u>	of	Ye Ye	es 🛛 No
		lividual contributions  (and Fund if applications)		0 or contributions un	der \$50 if form			
			ibie)			2. ID Nu	ımber	
Phil Car	ter Committee to	Elect					BCQH92	
	ributor Informati				emove			
	me, Mailing Address	& Phone		b. Job Title/Profession	1	d. Comme	ents	
Dan Ros	e city, state, & zip)			professor				
	aig Street, Winston	n-Salem, NC		c. Employer's Name/S	pecific Field			
27103		<b>,</b> <del>.</del>		Winston-Salem St		<i>y</i>		
					·	e. Election	Sum to Date	
						\$	300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm	/dd/yyyy)	k. Amount	<u> </u>
	A7445	Electronic				/01/2022	\$	300.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add □ Re	move			
	me, Mailing Address			b. Job Title/Profession		d. Comme	nts	
	city, state, & zip)			university staff				
Karin Fr								
	entley Street -Salem NC 27103			c. Employer's Name/S				
W IIIStoll	-Saicin 14C 27103			Wake Forest Univ	ersity	e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	dd/yyyy)	k. Amount		
	A7445	Electronic			04/	01/2022	\$	50.00
							\$	
							\$	
	ibutor Informatio			Add Ren	move			
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comme	its	
Andrew 3	city, state, & zip)			Unemployed				
	ton Street B			c. Employer's Name/Si	ecific Field			
	Salem NC 27101			Unemployed				
						e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/c	dd/yyyy)	k. Amount	
	A7445	Electronic			04/0	02/2022	\$	50.00
							\$	
							\$	
4. Total	only this Pag	e				\$	-	400.00
5. Total	5. Total of ALL CRO-1210 Pages						4107.00	
(This line	e must be on line 6 of	Detailed Summary Page C			\$		4187.00	

		m Individuals				Pg	_4 of		Yes	No No
		ividual contributions		0 or contrib	utions u	nde	r \$50 if form CR	O 1205 is n	ot used	
1. Comn	nittee Full Name	(and Fund if applica	ble)					2. ID Nu	mber	
Phil Cart	ter Committee to E	Elect							BCQH92	
3. Contr	ributor Informati	on		Add	R	tem	ove			
	me, Mailing Address	& Phone		b. Job Titl		on		d. Commen	its	
(include Michael	city, state, & zip)			universi	ty staff					
	oomingdale Drive			c. Employe	or's Name	/Sno	cific Field	-		
Cary NC				UNCSA		орс	CIRC PICIU	-		
Ū								e. Election S	Sum to Date	
								\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-I	Kind Descript	ion		j. Date (mm/dd/yy	уу)	k. Amount	
	A7445	Electronic					04/02/2	022	\$	50.00
									\$	
									\$	
	ibutor Informatio			Add [		em	ove			
	ne, Mailing Address &	& Phone		b. Job Title		n		d. Commen	ts	
	city, state, & zip) achtenberg			professor	Γ					
1833 Sus	_			c. Employe	r's Name/	Spec	cific Field			
Winston-	Salem NC 27104			WFU						
								e. Election S	ium to Date	
		T						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Descripti	ion	4	j. Date (mm/dd/yy	уу)	k. Amount	
	A7445	Electronic				4	04/04/20	)22	\$	50.00
									\$	
			<u> </u>						\$	
	butor Informatio			Add [		emo	ove			
	ie, Mailing Address & city, state, & zip)	E Phone		b. Job Title		n		d. Comment	8	
Chris Sto				unemplo	yeu					
5517 Oak	Summit Ct			c. Employe	r's Name/S	Spec	ific Field			
Winston-	Salem NC 27105			Unemplo	yed					
								e. Election S	um to Date	
								\$	75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descripti	on	-	j. Date (mm/dd/yy)	/y)	k. Amount	
	A7445	Electronic					04/08/20	)22	\$	75.00
						4			\$	
4 Total	only this Day								\$	
	only this Page							\$		175.00
	Total of ALL CRO-1210 Pages This line must be on line 6 of Detailed Summary Page CRO-110							\$		4187.00
(Inis line	must be on line 6 of 1				1 - 1					

Amendment

		m Individuals lividual contributions	over \$5	0 or contributions u	Pg <u>5</u> nder \$50 if form	of <u>1.6</u> CRO 1205 is r	Amendmer Yes	
		(and Fund if applica				2. ID Nu		
Phil Car	ter Committee to I	Elect					ВСОН92	
the same of the sa	ributor Informati			Add 🔲 1	Remove			
	me, Mailing Address	& Phone		b. Job Title/Professi	on	d. Comme	nts	
Robert F	e city, state, & zip)			lawyer				
	avan Drive			c. Employer's Name	Engeific Field			
	-Salem NC 27106			LANC	Specific Field			
						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	
	A7445	Electronic			04/	08/2022	\$	100.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add 🔲 R	lemove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	on .	d. Commen	its	
	city, state, & zip)			Unemployed				
Camus D	h Dallas Avenue			c. Employer's Name	Enssits Field			
	adino CA 92410			Unemployed	Specific Fleid			
				F		e. Election S	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/c	ld/yyyy)	k. Amount	
	A7445	Electronic			04/1	10/2022	\$	50.00
							\$	
							\$	
	ibutor Informatio			Add R	emove			
	ne, Mailing Address &	& Phone		b. Job Title/Profession	n	d. Comment	ts	
Andrew 1	city, state, & zip)			Unemployed				
	aball Lane			c. Employer's Name/	Specific Field			
	Salem NC 27105			Unemployed	Specific Field			
						e. Election S	um to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/d	d/yyyy)	k. Amount	
	A7445	Electronic			04/1	2/2022	\$	50.00
							\$	
							\$	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

200.00

4187.00

\$

\$

		m Individuals	over \$5	0 or cont	ributions	Pg s under	_6 of		Amendmen Yes	
		(and Fund if applica						2. ID Nu		
Phil Cart	er Committee to 1	Elect							BCQH92	
3. Contr	ibutor Informati	on		Add		Reme	ove			
a. Full Nar	me, Mailing Address	& Phone	- Layer	_	Title/Profe			d. Comme	ents	
(include	city, state, & zip)			unive	rsity staf	f				
Laura M	ullen									
	6th Street			c. Emp	loyer's Na	me/Spec	ific Field			
Winston-	Salem NC 27101			WFU						
								e. Election	Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Desc	ription		j. Date (mm/dd/y	ууу)	k. Amount	
	A7445	Electronic					04/12/2	022	\$	100.00
									\$	
									\$	
	ibutor Informati			Add		Remo	ove			
	ne, Mailing Address	& Phone			Title/Profe	ssion		d. Comme	nts	
	city, state, & zip)			Unem	ployed					
Sharon M 4166 Ger				. 17	oyer's Nar	(6)	1.00 - 174 - 1 3	-		
	uude Heights MI 4812	15			ployed	me/Spec	inc rieig	-		
	11015110 1111 1012			Chom	pioyed			e. Election	Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Cind Descr	iption		j. Date (mm/dd/yy	уу)	k. Amount	
	A7445	Electronic					04/14/2	022	\$	100.00
									\$	
									\$	
	butor Informati			Add		Remo	ve			
	ne, Mailing Address	& Phone		b. Job T	itle/Profes	ssion		d. Commer	nts	
	city, state, & zip)			staff						
Easton Ke										
422 Apex					oyer's Nan		ific Field			
Lexington	n NC 27295			Action	4Equity			a Flaction	Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Descr	iption		j. Date (mm/dd/yy		k. Amount	
	A7445	Electronic					04/15/20		\$	100.00
									\$	
							-		\$	
4. Total	only this Pag	e						\$		300.00
5. Total	of ALL CRO	-1210 Pages								4465.5

(This line must be on line 6 of Detailed Summary Page CRO-1100)

4187.00

\$

		m Individuals				Pg	7	of		Yes	No No
		ividual contributions		0 or contr	ibution	s unde	r \$50 if for	m CR	O 1205 is no	ot used	
1. Comn	nittee Full Name	(and Fund if applica	ible)						2. ID Nur	nber	
Phil Cart	er Committee to I	Elect								BCQH92	
	ibutor Informati			Add		Ren	love				
	me, Mailing Address	& Phone			itle/Profe	ession			d. Commen	ts	
	city, state, & zip)			Unem	ployed						
Liz Nola	na ford Road Northy				4 %7				-		
	Salem NC 27104	/est			oyer's Na ployed	me/Spe	ecific Field		-		
** 11131011	Salom 14C 27104			Onem	pioyeu				e. Election S	Sum to Date	
									\$	140.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descri	iption		j. Date (mn	n/dd/yy	уу)	k. Amount	
	A7445	Electronic					04	1/28/2	022	\$	140.00
										\$	
										\$	
3. Contri	ibutor Informatio	on		Add		Rem	ove				
	ne, Mailing Address	& Phone		b. Job Ti	itle/Profe	ssion			d. Comment	s	
	city, state, & zip)			engine	er						
Eric Weis	erson Avenue								-		
	Salem NC 27103						cific Field		-		
W IIIStOII-	Balcin NC 27103			Comms	s Aeros <sub>l</sub>	Dace			e. Election S	um to Date	
									\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Descri	ption		j. Date (mm	/dd/yy	уу)	k. Amount	
	A7445	Electronic					03	/29/20	022	\$	500.00
										\$	
										\$	
	butor Informatio			Add		Rem	ove				
	ie, Mailing Address &	& Phone		b. Job Ti	tle/Profe	sion			d. Comments	3	
	city, state, & zip)  A Jones Jr			staff							
5085 Dip				a Employ	manta Non	- o/C	iffa Field				
	wn NC 27051			Cone H		ne/Spec	cific Field				
				Conci	Ivaitii				e. Election St	um to Date	
									\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	ption		j. Date (mm/	/dd/yy	yy)	k. Amount	
	A7445	Electronic					03/	/31/20	)22	\$	100.00
										\$	
										\$	
	only this Page								\$		740.00
5. Total	of ALL CRO-	-1210 Pages							\$		4187.00
(This lime	mused he on live 6 of	Detailed Commence P	DO 1100						Φ		410/.00

		m Individuals			Pg	<u>8</u> of		☐ Ye	s 🛛 No
		ividual contributions (and Fund if applications)		0 or contributions	unde	r \$50 if form CF			
			ibie)				2. ID Nu	mber	
	ter Committee to I							BCQH92	
	ibutor Informati			Add 🗌	Rem	ove			
	me, Mailing Address	& Phone		b. Job Title/Profes			d. Commen	its	
	e city, state, & zip) e Coleman			stay at home m	iom				
913 Shur				c. Employer's Nau	ne/Sne	eific Field	-		
	-Salem NC 27101			Unemployed	ii spe	cinc Piciu	-		
							e. Election	Sum to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description		j. Date (mm/dd/y		k. Amount	
	A7445	Electronic				03/31/2	022	\$	100.00
								\$	
								\$	
3. Contr	ibutor Informatio	on .		Add 🗍	Rem	OVA			
	ne, Mailing Address			b. Job Title/Profes		ove	d. Commen	fe	
(include	city, state, & zip)			Unemployed			di Commen		
Denna C									
	nn Miller Street			c. Employer's Nam	ie/Spec	cific Field			
High Poi	nt NC 27260			Unemployed			777 4 0		
							e. Election S	um to Date	
4 D 1			,				\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	_	j. Date (mm/dd/yy	уу)	k. Amount	
	A7445	Electronic				03/29/2	022	\$	50.00
Ц								\$	
								\$	
	butor Informatio			Add 🗌	Remo	ove			
	ie, Mailing Address &	& Phone		b. Job Title/Profess	ion		d. Comment	8	
Kenneth 1	city, state, & zip)			Unemployed					
109 Jacks				c. Employer's Name	a/Gnoo	ifia Field	5		
	icer NC 28039			Unemployed	е/Брес	inc Field			
				onempioy cu			e. Election S	um to Date	
							\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description		j. Date (mm/dd/yy	yy)	k. Amount	
	A7445	Electronic				03/29/20	)22	\$	50.00
								\$	
								\$	
4. Total	only this Page						\$		200.00
5. Total	of ALL CRO-	-1210 Pages					<b>.</b>		44.07.44
(This line	must be on line 6 of L	Detailed Summary Page C	RO-1100)	)			\$		4187.00

Contr	ibutions fro	m Individuals				Pg 9 0	F10_	Amename	-
		ividual contributions		0 or contrib	utions u			ot used	
1. Comn	nittee Full Name	(and Fund if applica	ıble)				2. ID Nu	mber	
Committ	tee to Elect Phil C	arter						BCQH92	
	ibutor Informati			Add [		Remove			
	me, Mailing Address	& Phone		b. Job Title			d. Commer	ıts	
	e city, state, & zip) e Coleman	<del></del>		stay at he	ome mo	om			
913 Shur				c. Employe	r's Name	2/Specific Field	-		
	Salem, NC 27101			unemplo		or pechic A leiu			
					-		e. Election	Sum to Date	
							\$	103.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	L Kind Descripti	ion	j. Date (mm/dd/y	ууу)	k. Amount	
	A7445	in kind	tshir	ts		03/11/2		\$	103.00
								\$	
								\$	
3. Contri	ibutor Informati	on		Add [	] I	Remove		*	
	ne, Mailing Address	& Phone		b. Job Title			d. Commen	ts	<u>'</u>
(include Tara Ros	city, state, & zip)			stay at ho	me mo	m			
2054 Cra				c. Employe	r's Name	/Specific Field	-		
	Salem, NC 27103			unemploy		openic Field			
							e. Election S	Sum to Date	
							\$	46.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Descripti	on	j. Date (mm/dd/y	ууу)	k. Amount	
	A7445	in kind	flyer	'S		03/17/2	022	\$	46.00
								\$	
								\$	
	butor Informatio			Add [		Remove			
	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/	Profession	on	d. Comment	ts	
	tic Socialists of A	merica							
75 Maide	n Ln			c. Employer	's Name	Specific Field			
New York	k, NY 10038								
							e. Election S	700.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	on .	j. Date (mm/dd/y)	\$	k. Amount	
П	A7445	in kind		voter files		03/22/2		\$	700.00
	.,,,,,					V3, 22/12		\$	, , , , , , , , , , , , , , , , , , , ,
								\$	
4. Total	only this Page	e		in in the second	-	anvir A P. Tr	\$		849.00
	of ALL CRO						Ψ		047.00
(Thin line	west he on line 6 of	Datailed Comment Pro-	DO 1100				\$		4187.00

(This line must be on line 6 of Detailed Summary Page CRO-1100)

		lividual contributions		0 or contributions u	ınder \$50 if form Cl	RO 1205 is n	ot used	
1. Com	nittee Full Name	(and Fund if applica	ble)			2. ID Nu	mber	
Phil Cart	ter Committee to I	Elect					BCQH92	
3. Contr	ibutor Informati	on		Add 🔲 1	Remove			FF
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Professi	ion	d. Commer	nts	
	city, state, & zip)							
	Salem Democrati	С						
	s of America			c. Employer's Name	e/Specific Field			
PO Box								
Winston	Salem NC 27114					e. Election	Sum to Date	
						\$	348.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	A7445	in kind	prin	ted flyers	03/21/2	2022	\$	348.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add 🔲 F	Remove			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Professi	on	d. Commen	its	
	city, state, & zip)			retired				
Phil Cart								
	nt Zion Place			c. Employer's Name	/Specific Field			
Apt K	a			retired				
Winston	Salem, NC 27101					e. Election S	Sum to Date	
			,			\$	400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	A7445	in kind	logo	tshirts	03/15/2	2022	\$	400.00
							\$	
							\$	
3. Contri	ibutor Informatio	on		Add R	lemove			
	ne, Mailing Address &	& Phone		b. Job Title/Profession	on	d. Commen	ts	
(include	city, state, & zip)							
				a Employed Money	10	-		
				c. Employer's Name/	Specine Field	-		
						e. Election S	Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	/yy)	k. Amount	
							\$	
							\$	
							\$	
4. Total	only this Page	e				\$		748.00
5. Total	of ALL CRO	-1210 Pages				_		
CTIA II		D-4-11-10 P 0	no 1100			\$		4187.00

Amendment

10

☐ Yes ⊠

No

### **In-Kind Contributions**

Pg A of 2 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. II	Number
Comittee to Elect Phil Carter						BCQH92
3. Contributor Information Add	R	emov				
a. Full Name, Mailing Address & Phone				Contributor	c. Co	mments
(include city, state, & zip)		X		vidual		
Winston Salem Democratic Socialists of America		님		didate		
of America		H	Part PAC			
PO Box 26712		H		erendum	d. Ele	ction Sum to Date
Winston Salem, NC 27114			Oth	er Receipt Source	\$	348.00
e. Description				f. Date (mm/dd/yy)		g. Fair Market Amount
printed flyers						
				03/15/2022	2	\$ 348.00
						\$
						\$
3. Contributor Information Add	R	emove				
a. Full Name, Mailing Address & Phone				Contributor	c. Con	nments
(include city, state, & zip)		$\boxtimes$		vidual		
Phil Carter		Ц		didate		
965 Mount Zion Pl Apt K		H	Party			
Winston Salem, NC 27101		H		rendum	d Flor	ction Sum to Date
whiston batch, NC 27101		H		r Receipt Source		euon Sum to Date
				- Xtoodipt Source	\$	400.00
e. Description				f. Date (mm/dd/yyy	/y)	g. Fair Market Amount
shirts with logo				03/15/2022	:	\$ 400.00
						\$
						\$
3. Contributor Information Add	Re	emove				
a. Full Name, Mailing Address & Phone	-	b. Typ	_	ontributor	c. Con	ıments
(include city, state, & zip)		H		ridual lidate		
		H	Party			
		Ħ	PAC			
	1	$\Box$		rendum	d. Elec	ction Sum to Date
			Othe	r Receipt Source	\$	
e. Description				f. Date (mm/dd/yyy	v)	g. Fair Market Amount
10						\$
2						\$
						\$
4. Total only this Page	Ū.	21.			\$	748.00
5. Total of ALL CRO-1510 Pages						
(This line must be on line 17 of Detailed Summary Page CRO-1100)					\$	1597.00

### **In-Kind Contributions**

Pg <u>1</u> of <u>2</u> 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
Comittee to Elect Phil Carter					BCQH92
3. Contributor Information Add F	Remove				
a. Full Name, Mailing Address & Phone			Contributor	c. Con	nments
(include city, state, & zip)		Indi	vidual		
Katherine Coleman			didate		
913 Shuman st		Part			
Winston Salem, NC 27101		PAC			
			erendum	d. Ele	ction Sum to Date
		Othe	er Receipt Source	\$	103.00
e. Description			f. Date (mm/dd/yy	yy)	g. Fair Market Amount
tshirts to print on			03/11/2022	2	\$ 103.00
					\$
					\$
	Remove				
a. Full Name, Mailing Address & Phone			ontributor	c. Con	nments
(include city, state, & zip)			vidual		
Tara Rose			lidate		
2054 Craig St	H	Party			1
Winston Salem, NC 27103	ᄖ	PAC	rendum	A Fla	ction Sum to Date
	H		er Receipt Source	u. Elec	cuon Sum to Date
		Ouic		\$	46.00
e. Description			f. Date (mm/dd/yyy	y)	g. Fair Market Amount
Flyers printed			03/17/2022	!	\$ 46.00
					\$
					\$
3. Contributor Information Add	Remove				
a. Full Name, Mailing Address & Phone			ontributor	c. Con	iments
(include city, state, & zip)  Democratic Socialists of America			vidual		
75 Mainden Ln		Party	lidate		
New York, NY 10038		PAC			
100 101K, 141 10050	H		rendum	d. Elec	ction Sum to Date
	ă	Othe	r Receipt Source	\$	700.00
e. Description			f. Date (mm/dd/yyy	(v)	g. Fair Market Amount
VAN voter files					
			03/22/2022		\$ 700.00
					\$
					\$
4. Total only this Page				\$	849.00
5. Total of ALL CRO-1510 Pages					
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	1597.00

Contributions to Registered Entities Report Cover SATH COMMENT PROPERTY OF THE COMMENT OF THE PROPERTY OF THE Amendment

Wes Ø ₹

1. Keporung Entity Information	y information				
<ul> <li>Full Name of Entity Making Disbursement</li> </ul>	ng Disbursement	2022 APR 19	d Emity Type (Chee) One)	e. Federal ID Number (if applicable)	ber (if applicable)
Democratic Socialists of America, Inc	sts of America, Inc.	7	Other Organization		
Malling Address (include	h. Mailing Address (include City, State and Zip Code) and Phone Number		Nonprofit Organization	f. Date Filed	
75 Maiden Lane, No. 808	o. 808			4/15/22	
New York, N.Y. 10038 Ph: 212-727-8610	038	ie	g. Employer's Name or Principal Place of Business	Place of Business	h. Occupation
c. Detailed Description of Entity	nity				
Non-profit social w	Non-profit social welfare organization promoting democratic socialism	ıtic socialism	The state of the s		
2. Report Year	3. Period Start Date (mm/dd/yyyy)	(Y)	4. Period E	4. Period End Date (mm/dd/yyyy)	ld/yyyy)
2022	01/01/2022		04/30/2022	2	
5. Custodian of Books	oks				
Full Name of Entity's Cus	Full Name of Entity's Custodian of Books and Accounts				
Heidi Chua					
Mailing Address (include	h, Mailing Address (include City, State and Zip Code) and Phone Number	6.]	c. Employer's Name or Principal Place of Business	Place of Business	
75 Maiden Lane, No. 808	o. 808 0.38		New York, NY		
Ph: 212-727-8610		Q.	d. Occupation		1
			Fiscal Officer		
6. Total Donations ALL Pages	ALL Pages				\$ 0.00
7. Total Contributions ALL Pages	ions ALL Pages				\$ 700.00
CERTIFICATION					
I certify that this sta eath, and any person	I certify that this statement is complete, true and correct to the best of my knowledge. I further understand that this certification shall be treated as under oath, and any person making this certification knowing the information to be untrue is guilty of a Class I felony.	the best of my knov iformation to be un	vledge. I further under	stand that this cel I felony.	rtification shall b
Heidi Chua		//	Mura		04/15/2022
	Printed Name of Signer		Signature		

CRO-2215A

NC State Board of Elections

February 2012

**Donations to further Contributions reported at 2215C**Use this form to identify each person or entity making a donation of more than \$100, to further the contribution(s) reported on 2215C.

Page

of

\$ 0.00		(sum all the 'le' entries on all receipt pages)  NC State Board of Elections	3. Total Donations ALL Pages CRO-2215B
\$ 0.00		(sum all the '1e' entries on this page)	2. Total Donations THIS Page
<del>(s)</del>			
<del>69</del>			
<del>69</del>			
↔			
<del>€</del>			
₩			
e. Amount	d. Date (mm/dd/yyyy)	one Number  c. Principal Occupation  of Donor	2. Item b. Full Name, Mailing Address & Phone Number Num (include city, state, and zip)
			1 第

February 2012

Contributions Made to Registered Committees

Use this form to report Contributions within 30 days after they exceed \$100 or 10 days before an election they affect. The term Contribution includes anything of value given to a registered committee including monetary and in kind coordinated expenditures.

Page

February 2012		ons	NC State Board of Elections		CNO-2213C
\$ 700.00		ges)	(sum all the 'lf' entries on all disbursement pages)	3. Total Disbursements ALL Pages	3. Total Disburs
\$ 700.00			(sum all the 'If entries on this page)	2. Total Disbursements THIS Page	2. Total Disburs
6/9					
k. Amount					
j. Date Vendor Paid			Phone Number	. I un vane, maning Address (include city, state, and zip) & Phone Number	Y Smits Walle
			n Vendor Paid below.	If Form of Payment above is In Kind provide information on Vendor Paid below.	Form of Payment abo
	€9				
h. Election Sum to Date	g. Amount	f. Date (mm/dd/yyyy)		d. Form of Payment c. Description	c. Item Number
☐ State ☐ Muni					
☐ Federal ☐ County					
b. Level Registered			& Phone Number	Politicality, realing Address (include city, state, and zip) & Phone Number	The state of the s
				1. Committee Receiving Contribution	Eull Name Malling
\$ N/A				0	Ph: 212-727-8610
k Amount				10038	New York, N.Y. 10038
N/A				Democratic Socialists of America, Inc. 75 Maiden Lane, No. 808	Democratic Socialists of , 75 Maiden Lane, No. 808
j. Date Vendor Paid	Additional and the state of the		& Phone Number	. rull Name, Matting Address (include city, state, and zip) & Phone Number	. Full Name, Maning A
			n Vendor Paid below.	If Form of Payment above is in Kind provide information on Vendor Paid below.	Il Form of Payment ab
\$ 700.00	\$ 700.00	03/21/2022	Value of our use of our VAN/voter-file in organizing support for the candidate in coordination with the campaign.	In-Kind Valu	
h. Election Sum to Date	g. Amount	f. Date (mm/dd/yyyy)	e. Description	d. Form of Payment e. Desc	c. Item Number
□ State □ Muni				710	Ph: 336-692-4710
				WINSTON SALEM NC 27114	WINSTON SA
☐ Federal ☒ County				Committee to Elect Phil Carter	Committee to 1
b. Level Registered			& Phone Number	a. Full Name, Mailing Address (include city, state, and zip) & Phone Number	a. Full Name, Mailing
				1. Committee Receiving Contribution	1. Committee R