

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

Amendment

☒ Yes ☐ No

1. Committee Information

a. Full Name

Committee to elect Shai Woodbury

c. ID Number

WCQ800

b. Mailing Address (include City, State and Zip Code)

3022 N. Glenn Avenue
W-S, NC 27105

d. Date Filed

09/27/2024

e. Phone Number

336.997.22.86

2. Report Year

2022

3. Period Start Date (mm/dd/yy)

01/01/2022

4. Period End Date (mm/dd/yy)

04/30/2022

5. Treasurer Full Name

Sarah Latwanda Jackson

6. Type of Committee (Check One)

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

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

Municipal

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

State/County

- ☐ Organizational
☐ Quarterly
☒ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum

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

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

- ☐ Booster Fund
☐ Building Fund

☒ Other:

8. Number of Fundraisers this Report

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

Mechanics & Farmers Bank

b. Purpose

Committee Funds

c. Account Code

4 Shai

d. Period Begin Balance

\$ 0

11. Account Information

a. Financial Institution Full Name

Sutton Bank

b. Purpose

Committee Funds

c. Account Code

d. Period Begin Balance

\$ 0

CERTIFICATION

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

Sarah L. Jackson

Printed Name of Signer

Sarah L. Jackson

Signature of Appointed Treasurer

09/27/2024

Date

FOR OFFICE USE ONLY

Date Received:

Employee:

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☐ Hand Delivered
☐ Electronically Filed

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

☐ Signer has not received mandatory training

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

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

Detailed Summary

Amendment
☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Committee to Elect. Shai Wadby		Organizational		WC0800	
Start of Election Cycle: January 1, 2022		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 348.84		\$ 348.84	
6) Contributions from Individuals (CRO-1210)		\$ 1621.07		\$ 1621.07	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0		\$ 0	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0		\$ 0	
9) Loan Proceeds (CRO-1410)		\$ 700.00		\$ 700.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 60.00		\$ 60.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2729.91		\$ 2729.91	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 2418.19		\$ 2418.19	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 12.25		\$ 12.25	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 2430.44		\$ 2430.44	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 299.47		\$ 299.47	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 700.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Aggregated Contributions from Individuals

Page

of

1

Amendment

☒ Yes

☐ No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to elect Shai Woodbury				WCP800	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	2	Electronic		03/01/2022	\$ 5.00
<input type="checkbox"/> Remove	2	Electronic		03/04/2022	\$ 5.00
<input type="checkbox"/> Add	2	Electronic		03/04/2022	\$ 50.00
<input type="checkbox"/> Remove	2	Electronic		03/04/2022	\$ 25.00
<input type="checkbox"/> Add	2	Electronic		03/06/2022	\$ 25.00
<input type="checkbox"/> Remove	2	Electronic		03/07/2022	\$ 5.00
<input type="checkbox"/> Add	2	Electronic		03/07/2022	\$ 20.00
<input type="checkbox"/> Remove	2	Electronic		03/07/2022	\$ 25.00
<input type="checkbox"/> Add	2	Electronic		03/10/2022	\$ 25.00
<input type="checkbox"/> Remove	2	Electronic		03/11/2022	\$ 25.00
<input type="checkbox"/> Add	2	Electronic		03/11/2022	\$ 10.00
<input type="checkbox"/> Remove	2	Electronic		03/12/2022	\$ 5.00
<input type="checkbox"/> Add	2	Electronic		04/20/2022	\$ 30.00
<input type="checkbox"/> Remove	4 Shai	check		03/08/2022	\$ 20.00
<input type="checkbox"/> Add	4 Shai	check		03/08/2022	\$ 50.00
<input type="checkbox"/> Remove	4 Shai	Electronic		04/27/2022	\$ 23.84
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
4. Total only this Page					\$ 348.84
5. Total of ALL CRO-1205 Pages					\$ 348.84
(This line must be on line 5 of Detailed Summary Page CRO-1100)					

Contributions from Individuals

Pg 1 of 5 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to elect Shai Woodbury					WCQ800	
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Johnetta Roberts 2981 Saint Clair Rd. W-5 NC 27106			RN			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Novant		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	2	Electronic	Donation	03/04/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Tamatha Cornelius Atlanta, GA						
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	2	electronic	Donation	03/04/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Janet Wheeler WS, NC						
			c. Employer's Name/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	
<input type="checkbox"/>	2	electronic	Donation	03/08/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 275.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1621.07	

Contributions from Individuals

Pg 2 of 5 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to elect Shai Woodbury					WCQ800	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Cheryl Harry WS NC 27127				b. Job Title/Profession c. Employer's Name/Specific Field 		d. Comments e. Election Sum to Date \$ 200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	2	electronic	Donation	03/12/2022	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) London McKuiney WS NC 27101				b. Job Title/Profession c. Employer's Name/Specific Field 		d. Comments e. Election Sum to Date \$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	2	electronic	Donation	03/11/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Devonde McClain WS NC 27105				b. Job Title/Profession c. Employer's Name/Specific Field 		d. Comments e. Election Sum to Date \$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	2	electronic	Donation	3/11/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages					\$ 1621.07	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						

Contributions from Individuals

Pg 3 of 5 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to elect Shai Woodbury					WCQ800	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Angela Pringle Danville, VA				b. Job Title/Profession c. Employer's Name/Specific Field 		d. Comments 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	
<input type="checkbox"/>	2	electronic	Donation	03/13/2022	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Tony Lewis Butler, III WS, NC				b. Job Title/Profession c. Employer's Name/Specific Field 		d. Comments e. Election Sum to Date \$ 150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	2	electronic	Donation	3/16/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Carla Brown WS NC				b. Job Title/Profession Funeral Director c. Employer's Name/Specific Field Clark Brown & Son		d. Comments e. Election Sum to Date \$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	4 Shai	check	Donation	3/8/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages					\$ 1621.07	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 4 of 5 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to elect Shai Woodbury					WCQ800	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Harry James Jr. Kernersville, NC 27284				c. Employer's Name/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	
<input type="checkbox"/>	4 Shai	Check	Donation	02/26/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Wayne C. James WS NC 27107				c. Employer's Name/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	
<input type="checkbox"/>	4 Shai	Check	Donation	3/03/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Harry James, Sr. WS, NC				c. Employer's Name/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	
<input type="checkbox"/>	4 Shai	check	Donation	07/21/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1621.07	

Contributions from Individuals

Pg 5 of 5 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to elect. Shai Woodbury					WCR 880	
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Dorothy Jackson, M.SC 29574				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 96.07
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	4 Shai	Electronic	Donation	03/22/02	96.07	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 96.02	
5. Total of ALL CRO-1210 Pages					\$ 1621.07	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

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

Amendment
☒ Yes ☐ No

3. Payee Information

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

Disbursements

Pg 1 of 4 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable) <u>Committee to elect Shari Woodbury</u>						2. ID Number <u>WCQ890</u>	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>The Peanut Man (Joe Watson)</u> <u>100 Angelle Oaks Court</u> <u>WS NC 27105</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date <u>\$ 325.00</u>			
f. Account Code <u>2</u>	g. Form of Payment <u>electron</u>	h. Purpose Code <u>A</u>	i. Date (mm/dd/yyyy) <u>03/14/2022</u>	j. Amount <u>\$ 325.00</u>	k. Required Remarks <u>Advertiser/Social Med.</u>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Prints on the Cheap DBA</u> <u>Banners on the Cheap</u> <u>11525A</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date <u>\$ 474.00</u>			
f. Account Code <u>4 Shari</u>	g. Form of Payment <u>electronic</u>	h. Purpose Code <u>B</u>	i. Date (mm/dd/yyyy) <u>04/06/2022</u>	j. Amount <u>\$ 474.00</u>	k. Required Remarks <u>Banner/posters</u>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Pay Pal, CA</u> <u>888.221-1161</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date <u>\$ 69.73</u>			
f. Account Code <u>4 Shari</u>	g. Form of Payment <u>electronic</u>	h. Purpose Code <u>B</u>	i. Date (mm/dd/yyyy) <u>04/04/2022</u>	j. Amount <u>\$ 69.73</u>	k. Required Remarks		
5. Total only this Page						\$ <u>868.73</u>	
6. Total of ALL CRO-1310 Pages <small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>						\$ <u>2418.19</u>	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 2 of 4 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Shai Woodbury						WCQ800	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Christopher Redd DBA 360 Digital Marketing 27284 124 Thomas Drake Ct. Kernersville NC				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2	electronic	A	04/11/2022	\$ 500.00	advertisement		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Lillian List 3117 Poplar Wood Ct. #130 Raleigh, NC				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 20.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2	electronic	0	04/11/2022	\$ 20.00	Distribution List		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
5. Total only this Page							
						\$ 520.00	
6. Total of ALL CRO-1310 Pages							
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						\$ 2418.19	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 3 of 4 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to elect. Shari Woodbury						WCQ800	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Quamekia Shavers 3850 Heather View Lane WS NC 27127				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 425.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2	electronic	E	04/13/2022	\$ 125.00	Campaign Manager		
2	electronic	E	03/16/2022	\$ 300.00	Campaign Manager		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Quamekia Shaver 3850 Heather View Lane WS NC 27127				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 440.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2	electronic	E	04/19/2022	\$ 300.00	Campaign Manager		
2	electron	E	04/27/2022	\$ 140.00	Campaign T-Shirt		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Pay Pal, CA 888-221-1161				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 139.46	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
↑ Shari	electronic	B	03/21/2022	\$ 69.73			
↓ Shari	electronic	B	04/20/2022	\$ 69.73			
5. Total only this Page						\$ 1004.46	
6. Total of ALL CRO-1310 Pages						\$ 2418.19	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 4 of 4 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect Shai Woodbury</i>					2. ID Number <i>WCQ800</i>		
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>PAY PAL, CA</i> <i>888-221-1161</i>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date		\$ <i>25.00</i>	
f. Account Code <i>4Shai</i>	g. Form of Payment <i>Electronic</i>	h. Purpose Code <i>0</i>	i. Date (mm/dd/yyyy) <i>4/21/2022</i>	j. Amount <i>\$ 25.00</i>	k. Required Remarks <i>Clear out app</i>		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page							\$ <i>25.00</i>
6. Total of ALL CRO-1310 Pages							\$ <i>2418.19</i>
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Refunds/Reimbursements To the Committee

Pg 1 of 1 Amendment ☒ Yes ☐ No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable) <u>Committee to elect Shai Woodbury</u>				2. ID Number <u>WCQ800</u>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Quamekia Shavers</u> <u>3850 Heather View Lane</u> <u>W-S NC 27127</u>			d. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		g. Comments
			e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		h. Original Expenditure Date <u>04/13/2022</u>
					i. Original Expenditure Amt \$ <u>125.00</u>
b. Job Title/Profession <u>Campaign Manager</u>		c. Employer's Name/Specific Field		f. Purpose <u>Refund of Deposit</u>	
j. Election Sum to Date \$ <u>0</u>					
k. Account Code <u>2</u>		l. Form of Payment <u>electronic</u>		m. In-Kind Description <u>CASH App / Reimburse</u>	
		n. Date (mm/dd/yyyy) <u>04/13/2022</u>		o. Amount \$ <u>60.00</u>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		g. Comments
			e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		h. Original Expenditure Date
					i. Original Expenditure Amt \$
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				j. Election Sum to Date \$	
k. Account Code		l. Form of Payment		m. In-Kind Description	
				n. Date (mm/dd/yyyy)	
				o. Amount \$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		g. Comments
			e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		h. Original Expenditure Date
					i. Original Expenditure Amt \$
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				j. Election Sum to Date \$	
k. Account Code		l. Form of Payment		m. In-Kind Description	
				n. Date (mm/dd/yyyy)	
				o. Amount \$	
4. Total only this Page					\$ <u>60.00</u>
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)					\$ <u>60.00</u>

Loan Proceeds

Pg 1 of 3 Amendment ☒ Yes ☐ No

Use this form to report proceeds from a loan and loan endorser's information
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable) <i>Committee to elect Shai Woodbury</i>				2. ID Number <i>WCE 800</i>	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Malikah Woodbury 3022 N. Glenn Avenue WS NC 27105</i>		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy) <i>2/28/2022</i>	
				f. End Date (mm/dd/yyyy)	
g. Rate <i>0</i> %	h. Security Pledged	i. Account Code <i>2</i>	j. Form of Payment <i>electronic</i>	k. Amount <i>\$ 100.00</i>	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan.)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)				\$ <i>700.00</i>	

Loan Proceeds

Pg 2 of 3 Amendment ☒ Yes ☐ No

Use this form to report proceeds from a loan and loan endorser's information
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable) <u>Committee to elect Shai Woodbury</u>				2. ID Number <u>WCQ800</u>	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Malishai Woodbury</u> <u>3022 N. Glenn Avenue</u> <u>WS NC 27105</u>		b. Job Title/Profession		d. Comments	
				e. Start Date (mm/dd/yyyy) <u>04/11/2022</u>	
		c. Employer's Name/Specific Field		f. End Date (mm/dd/yyyy)	
g. Rate <u>0</u> %	h. Security Pledged	i. Account Code <u>2</u>	j. Form of Payment <u>electronic</u>	k. Amount <u>\$ 500.00</u>	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan.)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)				\$ <u>700.00</u>	

Loan Proceeds

Pg 3 of 3 Amendment ☒ Yes ☐ No

Use this form to report proceeds from a loan and loan endorser's information
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable) <u>Committee to elect Shai Woodbury</u>				2. ID Number <u>WC 880</u>	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Malishai Woodbury</u> <u>3022 N. Glenn Avenue</u> <u>WS NC 27105</u>		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy) <u>03/12/2022</u>	
				f. End Date (mm/dd/yyyy)	
g. Rate <u>0</u> %	h. Security Pledged	i. Account Code <u>2</u>	j. Form of Payment <u>electronic</u>	k. Amount <u>\$ 100.00</u>	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan.)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)				\$ <u>700.00</u>	



NORTH CAROLINA STATE BOARD OF ELECTIONS

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Committee to Elect Shari Woodbury
- Person or committee to make loan: Malishai Woodbury
- Date of loan to committee: 2/28/2022
- Name of lending institution (source): _____
- Amount of loan: \$ 100.00
- Description (if in-kind loan): _____
- Names of all parties responsible for payment of loan (guarantors): _____
- Period of loan: _____
- Rate of interest of loan: 0
- Security pledged for loan: _____

I, Malishai L. Woodbury, (Person lending money to committee) acknowledge that all of the information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

[Signature]
Signature of Lender

[Signature]
Signature of Treasurer of Committee

3/01/2022
Date Signed

3/01/2022
Date Signed



NORTH CAROLINA STATE BOARD OF ELECTIONS

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Committee to Elect Shai Woodbury
- Person or committee to make loan: Malishai Woodbury
- Date of loan to committee: 3/12/2022
- Name of lending institution (source): _____
- Amount of loan: \$ 100.00
- Description (if in-kind loan): _____
- Names of all parties responsible for payment of loan (guarantors): _____
- Period of loan: _____
- Rate of interest of loan: 0
- Security pledged for loan: _____

I, Malishai L. Woodbury, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan
that has an outstanding balance to any source.

Malishai L. Woodbury
Signature of Lender

3/12/2022
Date Signed

Shai L. Woodbury
Signature of Treasurer of Committee

3/12/2022
Date Signed



NORTH CAROLINA STATE BOARD OF ELECTIONS

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Committee to Elect Shai Woodbury
- Person or committee to make loan: Malishai Woodbury
- Date of loan to committee: 4/11/2022
- Name of lending institution (source): _____
- Amount of loan: \$500.00
- Description (if in-kind loan): _____
- Names of all parties responsible for payment of loan (guarantors): _____
- Period of loan: _____
- Rate of interest of loan: 0
- Security pledged for loan: _____

I, Malishai L. Woodbury, acknowledge that all of the information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

[Signature]
Signature of Lender

[Signature]
Signature of Treasurer of Committee

4-11-2022
Date Signed

4/11/2022
Date Signed

CRO-6100

Loan Proceeds Statement

Outstanding Loans

Pg 1 of 1 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to elect Shai Woodbury		WCQ800	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Malishai Woodbury 3022 N. Glenn Avenue W-S NC 27105		Instructor	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		A&T State University	2/28/2022
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %		\$ 100.00	\$ 100.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Malishai Woodbury 3022 N. Glenn Avenue W-S NC 27105		Instructor	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		A&T State University	4/11/2022
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %		\$ 500.00	\$ 500.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Malishai Woodbury 3022 N. Glenn Avenue W-S, NC 27105		Instructor	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		A&T State University	3/12/2022
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %		\$ 100.00	\$ 100.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 700.00	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)		\$ 700.00	