

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 JOSIE BARNHART	2021 Year End Semi-Annual	NEW-XXXXXX-C-065	
Start of Election Cycle: January 1, <u>2021</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,100.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 201.00	\$ 201.00
6) Contributions from Individuals	(CRO-1210)	\$ 5,276.17	\$ 6,376.17
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 5,477.17	\$ 6,577.17
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 2,458.17	\$ 2,458.17
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 95.00	\$ 95.00
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 1,326.17	\$ 1,326.17
17) In-Kind Contributions	(CRO-1510)	\$ 326.17	\$ 326.17
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4,205.51	\$ 4,205.51
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,371.66	\$ 2,371.66
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Page 1 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 JOSIE BARNHART				NEW-XXXXXX-C-065	
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	01	Electric Funds Tran		09/24/2021	\$ 1.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	01	Electric Funds Tran		11/12/2021	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	01	Electric Funds Tran		09/28/2021	\$ 30.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	01	Check		09/28/2021	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	01	Electric Funds Tran		12/01/2021	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	01	Electric Funds Tran		09/24/2021	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	01	Electric Funds Tran		10/19/2021	\$ 25.00
<input type="checkbox"/> Remove					
4. Total only this Page					\$ 201.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 201.00

CRO-1205

NC State Board of Elections

April 2007

REC'D IN PERSON

JAN 19 2022

NHC BD OF ELECTIONS

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
TRISTA BANFIELD 4524 PINE HOLLOW DRIVE WILMINGTON, NC 28412				TPM			
				c. Employer's Name/Specific Field			
				APITURE		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"/>	01	Electric Funds Tran		09/25/2021	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOSIE BARNHART 736 GRATHWOL DR WILMINGTON, NC 28405				HOMEMAKER			
				c. Employer's Name/Specific Field			
				NONE		e. Election Sum to Date	
						\$ 1.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	In-Kind	BUSINESS CARDS FROM VISTAPRINT	09/29/2021	\$ 76.54		
<input type="checkbox"/>	01	In-Kind	POSTAGE STAMPS FROM SAM'S CLUB	10/21/2021	\$ 57.75		
<input type="checkbox"/>	01	In-Kind	QR CODE GENERATOR PRO FROM EGODITOR	10/22/2021	\$ 191.88		
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	
REBEKKAH HOSSE BARNHART 6716 TOM KING BAYOU ROAD NAVARRE, FL 32566				BILINGUAL PROGRAM SUPPORT AGENT			
				c. Employer's Name/Specific Field			
				ISTS, INC		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"/>	01	Cash		10/17/2021	\$ 50.00		
<input type="checkbox"/>	01	Cash		10/18/2021	\$ 50.00		
<input type="checkbox"/>	01	Cash		10/19/2021	\$ 50.00		
4. Total only this Page						\$ 576.17	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,276.17	

JAN 19 2022

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART					NEW-XXXXXX-C-065	
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	
REBEKKAH HOSSE BARNHART 6716 TOM KING BAYOU ROAD NAVARRE, FL 32566			BILINGUAL PROGRAM SUPPORT AGENT			
			c. Employer's Name/Specific Field ISTS, INC			
					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"/>	01	Cash		10/20/2021	\$ 50.00	
<input type="checkbox"/>	01	Cash		10/21/2021	\$ 50.00	
<input type="checkbox"/>	01	Cash		10/22/2021	\$ 50.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
THOMAS CAHN 6121 CHILCOT LANE WILMINGTON, NC 28409			ADVERTISING			
			c. Employer's Name/Specific Field REEDS JEWELERS			
					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"/>	01	Electric Funds Tran		11/21/2021	\$ 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)			b. Job Title/Profession		d. Comments	
ROBBY COLLINS 228 ROGERSVILLE ROAD WILMINGTON, NC 28403			ATTORNEY			
			c. Employer's Name/Specific Field COLLINS AND COLLINS			
					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"/>	01	Electric Funds Tran		10/12/2021	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 5,276.17	

REC'D IN PERSON

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
LISA FERGUSON 113 EDGEWATER LANE WILMINGTON, NC 28403				AR WORKSHOP			
				c. Employer's Name/Specific Field			
				SELF-EMPLOYED			
				e. Election Sum to Date			
				\$		100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Electric Funds Tran		10/12/2021		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
STEPHANIE FORTUNATO 3509 MELISSA COURT WILMINGTON, NC 28409				INDEPENDENT CONTRACTOR			
				c. Employer's Name/Specific Field			
				SELF-EMPLOYED			
				e. Election Sum to Date			
				\$		60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Electric Funds Tran		10/09/2021		\$ 20.00	
<input type="checkbox"/>	01	Electric Funds Tran		11/09/2021		\$ 20.00	
<input type="checkbox"/>	01	Electric Funds Tran		12/09/2021		\$ 20.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CORRINNE GIVENS 44060 BUCKEYE COURT LANCASTER, CA 93536				ENGINEER			
				c. Employer's Name/Specific Field			
				NORTHROP GRUMMAN			
				e. Election Sum to Date			
				\$		1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Electric Funds Tran		09/26/2021		\$ 1,000.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 1,160.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 5,276.17	

REC'D IN PERSON

JAN 19 2022

NHC BD OF ELECTIONS

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
RACHEL GIVENS 500 PROVIDENCE MAIN STREET NW 10105 HUNTSVILLE, AL 35806				ENGINEER			
				c. Employer's Name/Specific Field			
				RAYTHEON			
				e. Election Sum to Date			
				\$		500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Electric Funds Tran		09/24/2021		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BEN HAWKING 8721 FAZIO DRIVE WILMINGTON, NC 28411				MORTGAGE LENDER			
				c. Employer's Name/Specific Field			
				CROSS COUNTRY MORTGAGE			
				e. Election Sum to Date			
				\$		250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Cash		11/19/2021		\$ 50.00	
<input type="checkbox"/>	01	Cash		11/20/2021		\$ 50.00	
<input type="checkbox"/>	01	Cash		11/21/2021		\$ 50.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BEN HAWKING 8721 FAZIO DRIVE WILMINGTON, NC 28411				MORTGAGE LENDER			
				c. Employer's Name/Specific Field			
				CROSS COUNTRY MORTGAGE			
				e. Election Sum to Date			
				\$		250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Cash		11/22/2021		\$ 50.00	
<input type="checkbox"/>	01	Cash		11/23/2021		\$ 50.00	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 750.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,276.17	

REC'D IN PERSON
JAN 19 2022
NHC BD OF ELECTIONS

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
FRANK KNECHT 7215 WRIGHTSVILLE AVE 304 WILMINGTON, NC 28403				EXECUTIVE			
				c. Employer's Name/Specific Field			
				WENDELL AUGUST FORGE			
				e. Election Sum to Date			
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m m/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Electric Funds Tran		11/12/2021	\$ 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)				b. Job Title/Profession		d. Comments	
BOB LOCKERBY 2008 DEER ISLAND LANE WILMINGTON, NC 28405				MILITARY / DEFENSE CONTRACTOR			
				c. Employer's Name/Specific Field			
				GDIT			
				e. Election Sum to Date			
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m m/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Electric Funds Tran		09/24/2021	\$ 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)				b. Job Title/Profession		d. Comments	
ADDISON PALANZA 205 BRADFORD ROAD WILMINGTON, NC 28409				ATTORNEY			
				c. Employer's Name/Specific Field			
				ATLANTIC COAST			
				e. Election Sum to Date			
						\$ 90.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m m/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Cash		11/21/2021	\$ 50.00		
<input type="checkbox"/>	01	Cash		11/22/2021	\$ 40.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 390.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,276.17	

REC'D IN PERSON

JAN 19 2022

NHC BD OF ELECTIONS

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
STEVEN PLACE 104 LAKE LORRAINE CIRCLE SHALIMAR, FL 32579				CEO			
				c. Employer's Name/Specific Field			
				SJP VENTURES		e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Electric Funds Tran		11/22/2021	\$ 250.00		
<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	
LAURA RAYMAN 8008 YELLOW DAISY DRIVE WILMINGTON, NC 28412				SR CUSTOMER SUCCESS MGR			
				c. Employer's Name/Specific Field			
				LYTICS		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"/>	01	Electric Funds Tran		10/08/2021	\$ 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)				b. Job Title/Profession		d. Comments	
FRANKLIN ROUSE 2213 WAVERLY DRIVE WILMINGTON, NC 28403				FINANCE			
				c. Employer's Name/Specific Field			
				ROUSE INSURANCE		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"/>	01	Electric Funds Tran		11/22/2021	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 550.00	
5. Total of ALL CRO-1210 Pages						\$ 5,276.17	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

REC'D IN PERSON

JAN 19 2022

NHC BD OF ELECTIONS

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
KIM RUDDER 504 JULIA DRIVE WILMINGTON, NC 28412				BUSINESS CONSULTANT			
				c. Employer's Name/Specific Field			
				SELF-EMPLOYED		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Electric Funds Tran		12/03/2021	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES SEAY JR 1110 GROPPO CV WILMINGTON, NC 28412				ATTORNEY			
				c. Employer's Name/Specific Field			
				SEAY LAW		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"/>	01	Check		11/21/2021	\$ 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)				b. Job Title/Profession		d. Comments	
TED SHIPLEY 2220 S. CANTERBURY ROAD WILMINGTON, NC 28403				ATTORNEY			
				c. Employer's Name/Specific Field			
				LIVE OAK BANK		e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Check		11/21/2021	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages						\$ 5,276.17	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

REC'D IN PERSON

JAN 19 2022

NHC BD OF ELECTIONS

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
MISTI SMITH 205 SIERRA DRIVE WILMINGTON, NC 28409				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Electric Funds Tran		09/26/2021		\$ 100.00	
<input type="checkbox"/>	01	Electric Funds Tran		11/20/2021		\$ 250.00	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID SNEEDEN 1840 S. LIVE OAK PARKWAY WILMINGTON, NC 28403				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				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"/>	01	Electric Funds Tran		11/21/2021		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RICHARD WILKINS P.O. BOX 1839 CAROLINA BEACH, NC 28428				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Electric Funds Tran		10/22/2021		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 950.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 5,276.17	

REC'D IN PERSON

JAN 19 2022

NHC BD OF ELECTIONS

Disbursements

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 JOSIE BARNHART						NEW-XXXXXX-C-065	
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	
ANEDOT 5555 HILTON AVE SUITE 106 BATON ROUGE, LA 70808							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 170.94	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Draft	O	12/31/2021	\$ 170.94	SERVICE FEE FOR ELECTRONIC		
				\$			
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	
AR WORKSHOP 1121-M MILITARY CUTOFF ROAD WILMINGTON, NC 28405							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 225.23	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Debit Card	O	12/16/2021	\$ 225.23	CORNHOLE BOARDS FOR FUNDRAISING		
				\$			
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	
MY INTERNET SCOUT 310 N Front St #180 WILMINGTON, NC 28401							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 2,062.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Check	A	10/05/2021	\$ 1,021.00	WEBSITE DESIGN AND		
01	Check	A	10/25/2021	\$ 20.00	CAMPAIGN CONSULTING DOMAIN SERVER HOST FEE		

5. Total only this Page	\$ 1,437.17
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>	\$ 2,458.17

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)			

REC'D IN PERSON
JAN 19 2022

Disbursements

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 JOSIE BARNHART				NEW-XXXXXX-C-065	
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) MY INTERNET SCOUT 310 N Front St #180 WILMINGTON, NC 28401			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
					\$ 2,062.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	A	10/25/2021	\$ 1,021.00	WEBSITE AND
				\$	CAMPAIGN CONSULTING
5. Total only this Page					\$ 1,021.00
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>					\$ 2,458.17
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)					

CRO-1310

NC State Board of Elections

December 2009

REC'D IN PERSON

JAN 9 2022

NHC BD OF ELECTIONS

Aggregated Non-Media Expenditures

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART					NEW-XXXXXX-C-065	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Draft	K	10/29/2021	\$ 5.00	CHECKING ACCOUNT FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check	H	12/03/2021	\$ 45.00	BABYSITTING FEE TO ATTEND
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check	H	12/10/2021	\$ 45.00	BABYSITTING FEE TO ATTEND
4. Total only this Page					\$ 95.00	
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 95.00	
6. Purpose Codes (List detailed expenditure code in (d) above)						
	B* - Printing	C* - Fundraising	D - To Another Candidate			
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses			
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund			
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

REC'D IN PERSON

JAN 19 2022

NHC BD OF ELECTIONS

Refunds/Reimbursements From the Committee Pg 1 of 2 Amendment Yes No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART				NEW-XXXXXX-C-065	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
JOSIE BARNHART 736 GRATHWOL DR WILMINGTON, NC 28405			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Receipt Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		09/20/2021
					i. Original Receipt Amount
					\$ 1,000.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose Code	
HOMEMAKER		NONE		L	
				j. Election Sum to Date	
				\$ 1.00	
k. Account Code	l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
01	Check			10/25/2021	\$ 1,000.00
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
JOSIE BARNHART 736 GRATHWOL DR WILMINGTON, NC 28405			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Receipt Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		10/22/2021
					i. Original Receipt Amount
					\$ 191.88
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose Code	
HOMEMAKER		NONE		P	
				j. Election Sum to Date	
				\$ 1.00	
k. Account Code	l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
01	Check	QR CODE GENERATOR		10/25/2021	\$ 191.88
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
JOSIE BARNHART 736 GRATHWOL DR WILMINGTON, NC 28405			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Receipt Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		10/21/2021
					i. Original Receipt Amount
					\$ 57.75
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose Code	
HOMEMAKER		NONE		P	
				j. Election Sum to Date	
				\$ 1.00	
k. Account Code	l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
01	Check	POSTAGE		10/25/2021	\$ 57.75
4. Total only this Page					\$ 1,249.63
5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)					\$ 1,326.17
6. Purpose Codes (List detailed disbursement code in (f) above)					
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* - Other					
* Codes require detailed explanation in required remarks field (m)					

REC'D IN PERSON

JAN 19 2022

Refunds/Reimbursements From the Committee Pg 2 of 2 Amendment Yes No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART				NEW-XXXXXX-C-065	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
JOSIE BARNHART 736 GRATHWOL DR WILMINGTON, NC 28405			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Receipt Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		09/29/2021
					i. Original Receipt Amount
					\$ 76.54
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose Code	
HOMEMAKER		NONE		P	
					j. Election Sum to Date
					\$ 1.00
k. Account Code	l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
01	Check	BUSINESS CARDS FROM VISTAPRINT		10/25/2021	\$ 76.54
4. Total only this Page					\$ 76.54
5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)					\$ 1,326.17
6. Purpose Codes (List detailed disbursement code in (f) above)					
L - Returned to Contributor		M - Overpayment for Service		N - Exceeded Contribution Limit	
P* - Reimbursement of In-Kin		O* Other			
* Codes require detailed explanation in required remarks field (m)					

CRO-1320

NC State Board of Elections

July 2007

REC'D IN PERSON
JAN 19 2022
NHC BD OF ELECTIONS

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT JOSIE BARNHART		NEW-XXXXXX-C-065	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
JOSIE BARNHART 736 GRATHWOL DR WILMINGTON, NC 28405		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 1.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
BUSINESS CARDS FROM VISTAPRINT		09/29/2021	\$ 76.54
POSTAGE STAMPS FROM SAM'S CLUB		10/21/2021	\$ 57.75
QR CODE GENERATOR PRO FROM EGODITOR GMBH		10/22/2021	\$ 191.88
4. Total only this Page		\$ 326.17	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 326.17	

CRO-1510

NC State Board of Elections

December 2007

REC'D IN PERSON
JAN 19 2022
NHC BD OF ELECTIONS