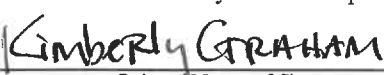
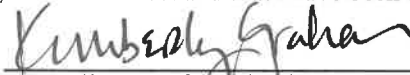



# Disclosure Report Cover

Amendment  
 Yes  No

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

1. Committee Information			
a. Full Name		c. ID Number	
PAT BRADFORD FOR NHC BOARD OF EDUCATION			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
PO BOX 870 WRIGHTSVILLE BEACH, NC 28480		01/06/2023	
		e. Phone Number	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	07/01/2022	10/22/2022	KIMBERLY GRAHAM
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
		<b>State/County</b> <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
		<b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			
3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
TRUIST			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN DONATIONS	000		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 2579.19		\$
<b>CERTIFICATION</b>			
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			
 Printed Name of Signer		 Signature of Appointed Treasurer	
		01/06/2023 Date	
FOR OFFICE USE ONLY			
Date Received:	<b>REC'D IN PERSON</b>	Employee:	
Date Postmarked:	<b>JAN 09 2023</b>	Employee:	
Date Scanned:	<b>NHC BD OF ELECTIONS</b>	Employee:	
Date Data Entered:		Employee:	
			Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed  <input type="checkbox"/> Signer has not received mandatory training
<p><b>Please Note:</b> 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.</p>			

# 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	
PAT BRADFORD FOR NHC BOARD OF EDUCATION	2022 Third Quarter		
Start of Election Cycle: January 1, <u>2021</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2,579.19	\$ 0.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 665.00	\$ 1,310.00
6) Contributions from Individuals (CRO-1210)		\$ 28,298.00	\$ 64,889.00
7) Contributions from Political Party Committees (CRO-1220)		\$ 15,494.09	\$ 15,494.09
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)		\$ 44,457.09	\$ 81,693.09
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 23,834.83	\$ 45,715.24
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 400.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 462.75	\$ 923.15
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 17,625.09	\$ 29,541.09
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 41,922.67	\$ 76,579.48
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 5,113.61	\$ 5,113.61
<b>ADDITIONAL INFORMATION</b>			
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

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Contributor Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Cash		09/01/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		10/05/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Check		09/01/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Cash		09/01/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Cash		09/02/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		10/01/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Check		10/11/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		09/17/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		09/09/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		09/02/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		10/14/2022	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Check		08/28/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		10/06/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Cash		09/01/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Check		09/01/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran		09/09/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Cash		09/01/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Check		10/11/2022	\$	50.00
<b>4. Total only this Page</b>					\$	\$665.00
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$665.00

REC'D IN PERSON

JAN 09 2023

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JENNIFER D BATSON 3037 RUSSELLBOROUGH DRIVE WILMINGTON, NC 28405				HOMEMAKER			
				<b>c. Employer's Name/Specific Field</b>			
				SELF		<b>e. Election Sum to Date</b>	
						\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/11/2022		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
TAMMY BLACK 635 RIBBLE DRIVE LELAND, NC 28451				SYSTEMS DEVELOPER			
				<b>c. Employer's Name/Specific Field</b>			
				THERMO FISHER SCIENTIFIC		<b>e. Election Sum to Date</b>	
						\$ 5,250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/05/2022		\$ 2,500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ADDIE BONSIGNORE NC				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
				SCHOOLTEACHER		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Cash		08/08/2022		\$ 50.00	
<input type="checkbox"/>	000	Cash		08/09/2022		\$ 50.00	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 2,850.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PAT BRADFORD PO 1448 WRIGHTSVILLE BEACH, NC 28480			JOURNALIST			
			<b>c. Employer's Name/Specific Field</b> SOZO8, INC			
					<b>e. Election Sum to Date</b>	
					\$ 6,166.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	In-Kind	PRINT ADVERTISING	09/17/2022	\$ 1,899.00	
<input type="checkbox"/>	000	In-Kind	PRINT ADVERTISING	10/20/2022	\$ 1,899.00	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KAY BRAXTON 1301 FUTCH CREEK ROAD WILMINGTON, NC 28411			BUSINESS OWNER			
			<b>c. Employer's Name/Specific Field</b> RMB CONSTRUCTION			
					<b>e. Election Sum to Date</b>	
					\$ 1,200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/22/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KAY BROCKDORFF 1100 HARBORWAY PLACE WILMINGTON, NC 28405			LEGAL SECRETARY			
			<b>c. Employer's Name/Specific Field</b> RETIRED			
					<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/16/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 5,298.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CATHERINE BRUNJES 404 LUMINA AVENUE N WRIGHTSVILLE BEACH, NC 28480				RETIREED			
				<b>c. Employer's Name/Specific Field</b> EDUCATION			
						<b>e. Election Sum to Date</b>	
						\$ 550.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/22/2022		\$ 300.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
RUSSELL BYRD 1240 LIBERTY LANDING ROAD SE WINNABOW, NC 28479				BUSINESS OWNER			
				<b>c. Employer's Name/Specific Field</b> AZALEA LIMO			
						<b>e. Election Sum to Date</b>	
						\$ 2,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/02/2022		\$ 1,000.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KAREN CLARK 7002 KEY POINT DRIVE WILMINGTON, NC 28405				RETIREED			
				<b>c. Employer's Name/Specific Field</b> SCHOOL TEACHER			
						<b>e. Election Sum to Date</b>	
						\$ 700.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/25/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 1,800.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARY JANE DYSON 1047 TIDELINE DRIVE LELAND, NC 28451				BOOKKEEPER			
				<b>c. Employer's Name/Specific Field</b> SELF			
						<b>e. Election Sum to Date</b> \$ 1,400.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/04/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ELIZABETH GRINNELL 7011 ESCHOL COURT WILMINGTON, NC 28409				CONSULTING MANAGEMENT			
				<b>c. Employer's Name/Specific Field</b> SELF			
						<b>e. Election Sum to Date</b> \$ 800.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/12/2022		\$ 800.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JOHN GRINNELL 7011 ESCHOL COURT WILMINGTON, NC 28409				CONSULTANT			
				<b>c. Employer's Name/Specific Field</b> LEAERSHIP INC			
						<b>e. Election Sum to Date</b> \$ 1,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/07/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 1,800.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JIMMY HOPKINS 115 N 3rd Street WILMINGTON, NC 28401			Developer/Broker			
			<b>c. Employer's Name/Specific Field</b> SELF EMPLOYED			
					<b>e. Election Sum to Date</b> \$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		10/01/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JOANNE KEMP 314 S FRONT STREET WILMINGTON, NC 28401			RETIRED			
			<b>c. Employer's Name/Specific Field</b> POLITICS			
					<b>e. Election Sum to Date</b> \$ 650.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		10/03/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ANTHONY MAGLIONE 417 JOHN S. MOSBY DRIVE WILMINGTON, NC 28412			PHYSICIAN			
			<b>c. Employer's Name/Specific Field</b> SELF			
					<b>e. Election Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/02/2022	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 1,200.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
TERESA MAPLES 149 NAVAHO TRAIL WILMINGTON, NC 28409				CLEANING SERVICE			
				<b>c. Employer's Name/Specific Field</b>			
				OWNER		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/24/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
BEVERLY MCCARTER 2001 SCRIMSHAW PLACE WILMINGTON, NC 28405				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
				CONSULTANT, AUTHOR, ARTIST		<b>e. Election Sum to Date</b>	
						\$ 750.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/11/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
HENRY MILLER III 102 South Channel Drive S Wrightsville Beach, NC 28480				PRESIDENT			
				<b>c. Employer's Name/Specific Field</b>			
				M&N Construction Supply, Inc.		<b>e. Election Sum to Date</b>	
						\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		09/23/2022		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 800.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

NHC BOARD 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
HARMON MISHOE 413 MOSS TREE DRIVE WILMINGTON, NC 28405				RETIREED			
				<b>c. Employer's Name/Specific Field</b> INSURANCE			
						<b>e. Election Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	000	Electric Funds Tran		09/12/2022	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LISA MOORE 1102 MILLHEIM COURT WILMINGTON, NC 28411				ITINERANT REVEREND			
				<b>c. Employer's Name/Specific Field</b> MINISTRY			
						<b>e. Election Sum to Date</b> \$ 300.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	000	Check		08/25/2022	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
R W MULLINS 2901 MARKET BRIDGE LANE RALEIGH, NC 27608				RETIREED			
				<b>c. Employer's Name/Specific Field</b> REAL ESTATE DEVELOPMENT			
						<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	000	Electric Funds Tran		10/19/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 600.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DESEREE MURAGLIA 1901 MARKET STREET WILMINGTON, NC 28403			CFO/CREATIVE DIRECTOR			
			<b>c. Employer's Name/Specific Field</b> J. LONG CUSTOM HOMES			
						<b>e. Election Sum to Date</b>
						\$ 3,250.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		08/25/2022	\$ 2,500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
THOMAS MURPHY 501 MOSS TREE DRIVE WILMINGTON, NC 28405			INSURANCE AND FINANCIAL SERVICES			
			<b>c. Employer's Name/Specific Field</b> SELF			
						<b>e. Election Sum to Date</b>
						\$ 100.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		08/25/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARION NESBITT 1918 ODYSSEY DRIVE WILMINGTON, NC 28405			RETIRED			
			<b>c. Employer's Name/Specific Field</b> STATISTICS RESEARCH NASA			
						<b>e. Election Sum to Date</b>
						\$ 325.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/11/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>						\$ 2,700.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 28,298.00

REC'D IN PERSON

JAN 09 2023

NC STATE BOARD 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ALEX PATCH 206 CAUSEWAY DR #687 WRIGHTSVILLE BEACH, NC 28480				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
				OIL AND GAS			
				<b>e. Election Sum to Date</b>			
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		10/12/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Monique Ribando 6 Island Drive Wrightsville Beach, NC 28480				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
				EXECUTIVE			
				<b>e. Election Sum to Date</b>			
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		10/03/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
WILLIAM RUDISILL 6435 WESTPORT DRIVE WILMINGTON, NC 28409				HOTEL OWNER			
				<b>c. Employer's Name/Specific Field</b>			
				SELF			
				<b>e. Election Sum to Date</b>			
						\$ 450.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/12/2022		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 850.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JUDI SANDERS PO BOX 3167 WILMINGTON, NC 28406				RETIRED BUSINESSWOMAN			
				<b>c. Employer's Name/Specific Field</b>			
				DEVELOPMENT			
				<b>e. Election Sum to Date</b>			
				\$		2,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		09/27/2022		\$ 1,500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
REID SMITH 114 W Main St Clayton, NC 27520				RESIDENTIAL DEVELOPER/BUILDER			
				<b>c. Employer's Name/Specific Field</b>			
				River Wild			
				<b>e. Election Sum to Date</b>			
				\$		1,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		07/14/2022		\$ 1,000.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JEFF STOKLEY 5332 MASONBORO HARBOUR DRIVE WILMINGTON, NC 28409				BUSINESSMAN			
				<b>c. Employer's Name/Specific Field</b>			
				SELF			
				<b>e. Election Sum to Date</b>			
				\$		500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/13/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						REC'D IN PERSON	
						\$ 3,000.00	
<b>5. Total of ALL CRO-1210 Pages</b>						JAN 09 2023	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 28,298.00	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
BRETT TANNER 8020 BALD EAGLE LANE WILMINGTON, NC 28411				BUSINESS OWNER			
				<b>c. Employer's Name/Specific Field</b>			
				PINNACLE TRAILER SALES INC			
						<b>e. Election Sum to Date</b>	
						\$ 3,600.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		07/19/2022		\$ 100.00	
<input type="checkbox"/>	000	Electric Funds Tran		08/13/2022		\$ 500.00	
<input type="checkbox"/>	000	Electric Funds Tran		09/11/2022		\$ 500.00	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
BRETT TANNER 8020 BALD EAGLE LANE WILMINGTON, NC 28411				BUSINESS OWNER			
				<b>c. Employer's Name/Specific Field</b>			
				PINNACLE TRAILER SALES INC			
						<b>e. Election Sum to Date</b>	
						\$ 3,600.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		10/02/2022		\$ 2,500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHRISTY TANNER 8020 BALD EAGLE LANE WILMINGTON, NC 28411				ADMIN			
				<b>c. Employer's Name/Specific Field</b>			
				PINNACLE TRAILER SALES, INC			
						<b>e. Election Sum to Date</b>	
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		10/16/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 4,100.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PEGGY VINEYARD 2136 BAY COLONY LANE WILMINGTON, NC 28405			RETIREED			
			<b>c. Employer's Name/Specific Field</b> SCHOOLTEACHER			
					<b>e. Election Sum to Date</b> \$ 150.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Electric Funds Tran		10/19/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
WOODY WHITE 201 LEES CUT WRIGHTSVILLE BEACH, NC 28480			ATTORNEY			
			<b>c. Employer's Name/Specific Field</b> WHITE LAW FIRM			
					<b>e. Election Sum to Date</b> \$ 150.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/03/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
RICHARD WILKINS 1323 BRIDGE BARRIER ROAD CAROLINA BEACH, NC 28428			RETIREED			
			<b>c. Employer's Name/Specific Field</b> COMPUTER ENGINEER			
					<b>e. Election Sum to Date</b> \$ 2,300.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		08/25/2022	\$ 1,500.00	
<input type="checkbox"/>	000	Electric Funds Tran		10/17/2022	\$ 800.00	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					REC'D IN PERSON \$ 2,600.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					JAN 09 2023 \$ 28,298.00	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHRISTOPHER WRIGHT 2411 CHESTNUT STREET WILMINGTON, NC 28405				ENERGY CONSULTANT			
				<b>c. Employer's Name/Specific Field</b>			
				SELF		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/20/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
VANCE YOUNG 1052 OCEAN RIDGE DRIVE WILMINGTON, NC 28405				REALTOR			
				<b>c. Employer's Name/Specific Field</b>			
				INTRACOASTAL REALTY		<b>e. Election Sum to Date</b>	
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/03/2022		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LINDA YUNASKA 102 SEAPATH ESATES WRIGHTSVILLE BEACH, NC 28480				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
				NURSING RN		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	000	Check		10/15/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						700.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 28,298.00	

REC'D IN PERSON

JAN 09 2023

# Contributions from Political Party Committees Pg 1 of 1

Amendment  
 Yes  No

Use this form to report contributions from a political party

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Comments</b>	
LOWER CAPE FEAR REPUBLICAN WOMEN PO BOX 7635 WILMINGTON, NC 28406					
				<b>c. Election Sum to Date</b>	
				\$ 1,167.00	
<b>d. Account Code</b>	<b>e. Form of Payment</b>	<b>f. In-Kind Description</b>	<b>g. Date (mm/dd/yyyy)</b>	<b>h. Amount</b>	
000	Check		08/04/2022	\$ 1,000.00	
000	Check		09/09/2022	\$ 167.00	
				\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Comments</b>	
NCGOP 1506 Hillsborough St Raleigh, NC 27605					
				<b>c. Election Sum to Date</b>	
				\$ 13,827.09	
<b>d. Account Code</b>	<b>e. Form of Payment</b>	<b>f. In-Kind Description</b>	<b>g. Date (mm/dd/yyyy)</b>	<b>h. Amount</b>	
000	In-Kind	Print/Postage for Dir. Mail	09/19/2022	\$ 8,740.29	
000	In-Kind	Print/Postage for Dir. Mail	10/05/2022	\$ 5,086.80	
				\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Comments</b>	
NEW HANOVER COUNTY REPUBLICAN WOMENS CLUB PO BOX 194 CAROLINA BEACH, NC 28428					
				<b>c. Election Sum to Date</b>	
				\$ 500.00	
<b>d. Account Code</b>	<b>e. Form of Payment</b>	<b>f. In-Kind Description</b>	<b>g. Date (mm/dd/yyyy)</b>	<b>h. Amount</b>	
000	Check		09/16/2022	\$ 500.00	
				\$	
				\$	
<b>4. Total only this Page</b>				REC'D IN PERSON 15,494.09	
<b>5. Total of ALL CRO-1220 Pages</b> (This line must be on line 7 of Detailed Summary Page CRO-1100)				JAN 9 2023 15,494.09	

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
AMAZON 410 Terry Ave N Seattle, WA 98109							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
						\$ 183.55	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	K	09/14/2022	\$ 51.82	SUPPLIES		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
ANEDOT 1340 Poydras Street New Orleans, LA 70112							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
						\$ 646.20	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	O	08/25/2022	\$ 100.30	TRANSACTION FEE		
000	Electric Funds Tran	KO	10/02/2022	\$ 100.30	TRANSACTION FEE		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
FIRELUX 7009 NORTH BEND ROAD WILMINGTON, NC 28411							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
						\$ 16,145.14	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	08/30/2022	\$ 1,500.00	ADVERTISING		
000	Check	A	09/26/2022	\$ 5,740.00	ADVERTISING		
<b>5. Total only this Page</b>						\$ 7,492.42	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83	
<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>							
<b>7. Purpose Codes</b> (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* - Printing 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 09 2023

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
FIRELUX 7009 NORTH BEND ROAD WILMINGTON, NC 28411							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
						\$ 16,145.14	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	10/07/2022	\$ 1,500.00	ADVERTISING		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
GLOBAL RIVER CHURCH 4702 College Rd Wilmington, NC 28412							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
						\$ 3,995.50	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	07/25/2022	\$ 110.00	CHARITABLE DONATION		
000	Check	O	08/08/2022	\$ 100.00	CHARITABLE DONATION		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
GLOBAL RIVER CHURCH 4702 College Rd Wilmington, NC 28412							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
						\$ 3,995.50	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	08/22/2022	\$ 60.00	CHARITABLE DONATION		
000	Check	O	08/29/2022	\$ 510.00	CHARITABLE DONATION		
<b>5. Total only this Page</b>						\$ 2,280.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83	
<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>							
<b>7. Purpose Codes</b> (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 09 2023

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
GLOBAL RIVER CHURCH 4702 College Rd Wilmington, NC 28412				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 3,995.50	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	09/06/2022	\$ 59.00	CHARITABLE DONATION		
000	Check	O	09/19/2022	\$ 75.00	CHARITABLE DONATION		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
GLOBAL RIVER CHURCH 4702 College Rd Wilmington, NC 28412				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 3,995.50	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	09/19/2022	\$ 434.00	CHARITABLE DONATION		
000	Check	O	10/03/2022	\$ 260.00	CHARITABLE DONATION		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
GLOBAL RIVER CHURCH 4702 College Rd Wilmington, NC 28412				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 3,995.50	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	10/06/2022	\$ 460.00	CHARITABLE DONATION		
000	Check	O	10/17/2022	\$ 212.00	CHARITABLE DONATION		
<b>5. Total only this Page</b>						\$ 1,500.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83	
<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>							
<b>7. Purpose Codes</b> (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)							

JAN 09 2023

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
HOME DEPOT 5511 Carolina Beach Rd WILMINGTON, NC 28412							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 128.96	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	F	10/11/2022	\$ 68.01	CAMPAIGN MATERIALS		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
IMAGINATION VINYL 228 Morning View Way LELAND, NC 28451							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 784.09	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	K	10/21/2022	\$ 784.09	CAMPAIGN SUPPLIES		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
NCGOP 1506 Hillsborough Street Raleigh, NC 27605							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 5,100.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Check	O	10/14/2022	\$ 5,100.00	DONATION		
				\$			
<b>5. Total only this Page</b>						\$ 5,952.10	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83	
<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>							
<b>7. Purpose Codes</b> (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

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Type of Disbursement</b> <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						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>				b. Coordinated Committee Name		d. Comments
NEW HANOVER COUNTY REPUBLICAN WOMENS CLUB PO BOX 194 CAROLINA BEACH, NC 28428						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000	Check	O	09/26/2022	\$ 100.00	COMMUNITY EVENT	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>				b. Coordinated Committee Name		d. Comments
NEW HAVOVER COUNTY GOP 829 S Kerr Ave Wilmington, NC 28403						
				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
						\$ 3,412.24
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000	Check	O	09/20/2022	\$ 3,150.00	DONATION	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>				b. Coordinated Committee Name		d. Comments
SAM'S CLUB 412 SOUTH COLLEGE ROAD WILMINGTON, NC 28403						
				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
						\$ 67.30
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000	Debit Card	O	09/02/2022	\$ 67.30	GAS FOR CAMPAIGN DOOR KNOCKS	
				\$		
<b>5. Total only this Page</b>						\$ 3,317.30
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83
<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>						
<b>7. Purpose Codes</b> (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 09 2023

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Type of Disbursement</b> <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						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments	
SOUTHERN SIGN COMPANY 5649 CAROLINA BEACH ROAD WILMINGTON, NC 28412						
			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:			
					\$ 813.20	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
000	Electric Funds Tran	A	09/22/2022	\$ 69.55	SIGNAGE	
000	Electric Funds Tran	A	09/30/2022	\$ 69.55	SIGNAGE	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments	
SOUTHERN SIGN COMPANY 5649 CAROLINA BEACH ROAD WILMINGTON, NC 28412						
			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:			
					\$ 813.20	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
000	Electric Funds Tran	A	10/19/2022	\$ 139.10	SIGNAGE	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments	
STAPLES 322 College Rd WILMINGTON, NC 28403						
			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:			
					\$ 341.17	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
000	Electric Funds Tran	K	08/27/2022	\$ 83.43	SUPPLIES	
000	Electric Funds Tran	K	10/02/2022	\$ 121.92	OFFICE SUPPLIES	
<b>5. Total only this Page</b>						\$ 483.55
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83
<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>						
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
<b>A* - Media</b> <b>B* - Printing</b> <b>C* - Fundraising</b> <b>D* - Other Candidate</b> <b>E - Salaries</b> <b>F* - Equipment</b> <b>G - Political Party</b> <b>H* - Holding Public Office Expenses</b> <b>I - Postage</b> <b>J - Penalties</b> <b>K* - Office Expenses</b> <b>Q* - Donation to Legal Expense Fund</b> <b>O* Other</b>						
* Codes require detailed explanation in required remarks field (k)						

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
STAPLES 322 College Rd WILMINGTON, NC 28403							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 341.17	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	K	10/12/2022	\$ 80.22	OFFICE SUPPLIES		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
STICKER MULE 336 Forest Ave Amsterdam, NY 12010							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 642.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	B	09/19/2022	\$ 113.42	STICKERS		
000	Electric Funds Tran	B	10/06/2022	\$ 251.45	MARKETING		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
USPS 206 Causeway Dr Wrightsville Beach, NC 28480							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 95.20	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	I	09/13/2022	\$ 72.00			
				\$			
<b>5. Total only this Page</b>						\$ 517.09	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83	
<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>							
<b>7. Purpose Codes</b> (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 09 2023

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
PAT BRADFORD FOR NHC BOARD OF EDUCATION						
<b>3. Type of Disbursement</b> <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						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>				b. Coordinated Committee Name		d. Comments
VISTAPRINT 95 HAYDEN AVENUE LEXINGTON, MA 02421						
				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
						\$ 3,071.30
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000	Electric Funds Tran	B	09/07/2022	\$ 565.47	CAMPAIGN MATERIALS	
000	Electric Funds Tran	B	10/06/2022	\$ 202.68	CAMPAIGN MATERIALS	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>				b. Coordinated Committee Name		d. Comments
VISTAPRINT 95 HAYDEN AVENUE LEXINGTON, MA 02421						
				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
						\$ 3,071.30
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000	Electric Funds Tran	B	10/06/2022	\$ 724.11	CAMPAIGN MATERIALS	
000	Electric Funds Tran	B	10/12/2022	\$ 724.11	CAMPAIGN MATERIALS	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>				b. Coordinated Committee Name		d. Comments
WIX.COM PO BOX 40190 SAN FRANCISCO, CA						
				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
						\$ 152.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000	Electric Funds Tran	A	07/22/2022	\$ 19.00	WEB SITE	
000	Electric Funds Tran	A	08/22/2022	\$ 19.00	WEB SITE	
<b>5. Total only this Page</b>						\$ 2,254.37
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83
<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>						
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
<div style="display: flex; justify-content: space-between;"> <div>A* - Media</div> <div>B* - Printing</div> <div>C* - Fundraising</div> <div>D - To Another Candidate</div> </div> <div style="display: flex; justify-content: space-between;"> <div>E - Salaries</div> <div>F* - Equipment</div> <div>G - Political Party</div> <div>H* - Holding Public Office Expenses</div> </div> <div style="display: flex; justify-content: space-between;"> <div>I - Postage</div> <div>J - Penalties</div> <div>K* - Office Expenses</div> <div>Q* - Donation to Legal Expense Fund</div> </div> <div style="display: flex; justify-content: space-between;"> <div>O* Other</div> <div></div> <div></div> <div></div> </div>						
* Codes require detailed explanation in required remarks field (k)						

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
WIX.COM PO BOX 40190 SAN FRANCISCO, CA							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						<b>e. Election Sum to Date</b>	
						\$ 152.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
000	Electric Funds Tran	A	09/22/2022	\$ 19.00	WEBSITE		
000	Electric Funds Tran	A	10/21/2022	\$ 19.00	WEBSITE		
<b>5. Total only this Page</b>						\$ 38.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 23,834.83	
<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>							
<b>7. Purpose Codes</b> (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 09 2023  
 NHC BD OF ELECTIONS

# Aggregated Non-Media Expenditures

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

<b>1. Committee Full Name (and Fund if applicable)</b> PAT BRADFORD FOR NHC BOARD OF EDUCATION	<b>2. ID Number</b>
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**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	000	Electric Funds Tran	O	09/13/2022	\$ 5.34	SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/13/2022	\$ 8.12	SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	07/14/2022	\$ 40.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	07/19/2022	\$ 4.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	08/13/2022	\$ 20.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	08/25/2022	\$ 4.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/01/2022	\$ 2.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/09/2022	\$ 2.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/09/2022	\$ 2.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/11/2022	\$ 20.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/12/2022	\$ 8.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/17/2022	\$ 2.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/23/2022	\$ 8.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/01/2022	\$ 2.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/01/2022	\$ 20.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/03/2022	\$ 20.30	TRANSACTION FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/03/2022	\$ 20.30	TRANSACTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/05/2022	\$ 1.30	TRANSACTION FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/06/2022	\$ 1.10	TRANSACTION FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/12/2022	\$ 4.30	TRANSACTION FEES

<b>4. Total only this Page</b>	\$ 198.66
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<b>5. Total of ALL CRO-1315 Pages</b> <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>	\$ 462.75
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<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>			
E - Salaries	B* - Printing	C* - Fundraising	D - To Another Candidate
I - Postage	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
O* - Other	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund

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

# Aggregated Non-Media Expenditures

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

<b>1. Committee Full Name (and Fund if applicable)</b> PAT BRADFORD FOR NHC BOARD OF EDUCATION						<b>2. ID Number</b>
<b>3. Payee Information</b>						
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	000	Electric Funds Tran	O	10/14/2022	\$ 1.50	TRANSACTION FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/16/2022	\$ 20.30	TRANSACTION FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/19/2022	\$ 4.30	TRANSACTION FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	10/19/2022	\$ 6.30	TRANSACTION FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Check	O	09/26/2022	\$ 50.00	CHARITABLE DONATION
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	F	09/26/2022	\$ 26.58	SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	K	10/17/2022	\$ 26.72	SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Debit Card	O	07/27/2022	\$ 45.39	VOLUNTEERS LUNCH
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	08/29/2022	\$ 40.00	COMMUNITY EVENT
<input type="checkbox"/> Add <input type="checkbox"/> Remove	000	Electric Funds Tran	O	09/14/2022	\$ 43.00	COMMUNITY EVENT
<b>4. Total only this Page</b>					\$	264.09
<b>5. Total of ALL CRO-1315 Pages</b> <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	462.75
<b>6. Purpose Codes</b> (List detailed expenditure code in (d) above)						
	<b>B* - Printing</b>	<b>C* - Fundraising</b>	<b>D - To Another Candidate</b>			
<b>E - Salaries</b>	<b>F* - Equipment</b>	<b>G - Political Party</b>	<b>H* - Holding Public Office Expenses</b>			
<b>I - Postage</b>	<b>J - Penalties</b>	<b>K* - Office Expenses</b>	<b>Q* - Donations to Legal Expense Fund</b>			
<b>O* - Other</b>						
<b>* Codes require detailed explanation in required remarks field (g)</b>						

REC'D IN PERSON

JAN 09 2023

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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
PAT BRADFORD FOR NHC BOARD OF EDUCATION			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
PAT BRADFORD PO 1448 WRIGHTSVILLE BEACH, NC 28480		<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	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 6,166.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
PRINT ADVERTISING		09/17/2022	\$ 1,899.00
PRINT ADVERTISING		10/20/2022	\$ 1,899.00
			\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
NCGOP 1506 Hillsborough St Raleigh, NC 27605		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 13,827.09	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Print/Postage for Dir. Mail		09/19/2022	\$ 8,740.29
Print/Postage for Dir. Mail		10/05/2022	\$ 5,086.80
			\$
<b>4. Total only this Page</b>			\$ 17,625.09
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 17,625.09

REC'D IN PERSON

JAN 09 2023

NHC BD OF ELECTIONS