

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
Khristy For Our Schools	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
PO Box 121 Terrell NC 28682	07/02/2026
	e. Phone Number
	828-548-0775

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2026	12/9/2026	6/30/2026	Laurie Jeanne Maddex

6. Type of Committee (Check One)	9. Type of Report (check only one type of report from one category)	10. Special Report Name
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser	Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special State/County ☐ Organizational ☐ Quarterly ☐ First ☒ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special	
7. Type of Fund (if applicable, check one)		
☐ "Booster Fund" ☐ Building Fund ☐ Other:		
8. Number of Fundraisers this Report		
2		

11. Account Information	11. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
First Horizon Bank, Mooresville	
b. Purpose	b. Purpose
Campaign	
c. Account Code	c. Account Code
KWS	
d. Period Begin Balance	d. Period Begin Balance
\$ 0.00	\$

CERTIFICATION

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

Laurie Maddex

Printed Name of Signer

Signature of Appointed Treasurer

9/11/2026

Date

FOR OFFICE USE ONLY

Date Received:	Employee:	
Date Postmarked:	Employee:	
Date Scanned:	Employee:	
Date Data Entered:	Employee:	

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☐ Hand Delivered
☐ Electronically Filed
☐ Signer has not received mandatory training

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

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

Detailed Summary

Amendment

☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Khristy For Our Schools		second quarter amend			
Start of Election Cycle: January 1, <u>2026</u>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0		\$ 193.94	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 200.00		\$ 200.00	
6) Contributions from Individuals (CRO-1210)		\$ 1030.76		\$ 1030.76	
7) Contributions from Political Party Committees (CRO-1220)		\$ 500.00		\$ 500.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0		\$ 0	
9) Loan Proceeds (CRO-1410)		\$ 0		\$ 0	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$ 65.56		\$ 65.56	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0		\$ 0	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$ 0		\$ 0	
11c) Outside Sources of Income (CRO-1250)		\$ 0		\$ 0	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$ 0		\$ 0	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$ 0		\$ 0	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1796.32		\$ 1796.32	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 338.01		\$ 338.01	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0		\$ 0	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0		\$ 0	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 435.11		\$ 435.11	
15) Loan Repayments (CRO-1420)		\$ 0		\$ 0	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 80.76		\$ 80.76	
17) In-Kind Contributions (CRO-1510)		\$ 580.76		\$ 580.76	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1434.64		\$ 1434.64	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 361.68		\$ 361.68	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$ 0			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$ 0			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0			
25) Administrative Support (CRO-1710)		\$ 0		\$ 0	
26) Forgiven Loans (CRO-1440)		\$ 0		\$ 0	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0		\$ 0	
28) Contributions to be Refunded (CRO-1215)		\$ 80.76		\$ 80.76	

Aggregated Contributions from Individuals

Page

1

of

Amendment

Yc

No

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

[illegible]

Contributions from IndividualsPg 1 of 3 ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Khristy For Our Schools						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Khristy Womack Smith PO Box 121 Terrell, NC 28682			home maker		opening deposit for acct cash deposit- error	
			c. Employer's Name/Specific Field			
			none		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	
☐	KWS	transfer		1/6/2026	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jan Jolly Sanders 2208 Lake Vista Dr Mt Holly NC 28120			nurse			
			c. Employer's Name/Specific Field			
			Novant		e. Election Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	KWS	Check		2/20/2026	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Grace Love Smith 122 Pine Bower Dr Rome GA 30165			political director			
			c. Employer's Name/Specific Field			
			Empower Project		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	
☐	KWS	transfer		3/13/2026	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1030.76	

Contributions from Individuals

Pg 2 of 3 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Khristy For Our Schools						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) AJ Jones 1056 BJ Clifton Rd Statesboro, GA 30461			b. Job Title/Profession		d. Comments	
			sales consultant			
			c. Employer's Name/Specific Field			
			Time Warner		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	
☐	KWS	transfer		3/17/2026	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Joan Gardner 8736 Popular Ln Sherrills Ford, NC 28673			b. Job Title/Profession		d. Comments	
			retired			
			c. Employer's Name/Specific Field			
			none		e. Election Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	KWS	check		5/14/2026	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Linda McCarty 708 Rusk St Waco, TX 76704			b. Job Title/Profession		d. Comments	
			retired			
			c. Employer's Name/Specific Field			
			none		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	
☐	KWS	check		5/10/2026	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1030.76	

Contributions from Individuals

Pg 3 of 3 Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Khristy For Our Schools						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Khristy Womack Smith PO Box 121 Terrell NC 28682			b. Job Title/Profession		d. Comments	
			homemaker			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			none			
				\$ 80.76		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	KWS		paper	4/10/2026	\$ 14.35	
☐	KWS		balloons	5/14/2026	\$ 6.41	
☐	KWS		PObox fee	12/8/2025	\$ 50.00	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Khristy Womack Smith PO Box 121 Terrell, NC 28682			b. Job Title/Profession		d. Comments	
			homemaker			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			none			
				\$ 80.76		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	KWS		filing fee	12/9/2025	\$ 10.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
				\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 80.76	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1030.76	

Contributions from Political Party Committees

Pg 1 of 1 Amendment ☒ Yes ☐ No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Khristy For Our Schools					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) NC Democratic Party 220 Hillsborough St Raleigh, NC 27603				b. Comments	
				inkind VoteBuilder Platform	
				c. Election Sum to Date	
				\$ 500.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
	in kind	votebuilder platform	3/23/2026	\$ 500.00	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 500.00	
5. Total of ALL CRO-1220 Pages				\$ 500.00	
<i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>					

Refunds/Reimbursements To the Committee

Pg 1

of 1

Amendment

☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Khristy For Our Schools					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		g. Comments	
Amazon.com Inc 410 Terry Ave North Seattle WA 98109		☒ Candidate ☐ PAC		return paper	
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		h. Original Expenditure Date	
		☐ Federal ☒ County:		5/11/2026	
		☐ State ☐ Municipality:			
				i. Original Expenditure Amt	
				\$ 13.15	
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose		j. Election Sum to Date	
		L		\$	
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount	
KWS	debit		6/1/2026	\$ 13.15	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		g. Comments	
Amazon.com Inc 410 Terry Ave North SEattle WA 98109		☒ Candidate ☐ PAC		return shirt	
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		h. Original Expenditure Date	
		☐ Federal ☒ County:		5/27/2026	
		☐ State ☐ Municipality:			
				i. Original Expenditure Amt	
				\$ 9.62	
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose		j. Election Sum to Date	
		L		\$ 9.62	
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount	
KWS	debit		6/1/2026	\$ 9.62	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		g. Comments	
Amazon.com Inc 410 Terry Avenue North Seattle WA 98109		☐ Candidate ☒ PAC		return button	
		☐ Referendum ☐ Party		maker	
		e. Level Registered (Specify)		h. Original Expenditure Date	
		☐ Federal ☒ County:		6/1/2026	
		☐ State ☐ Municipality:			
				i. Original Expenditure Amt	
				\$ 42.79	
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose		j. Election Sum to Date	
		L		\$ 42.79	
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount	
KWS	debit		6/15/2026	\$ 42.79	
4. Total only this Page				\$ 65.56	
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)				\$ 65.56	

Disbursements

Pg 1 of 1

Amendment

☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Khristy For Our Schools						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Amazon.com Inc 410 Terry Ave North Seattle WA 98109			Khristy for Our Schools		tent for event	
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$ 154.07	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
KWS	debit	K	5/27/2026	\$154.07	tent for fundraising eve	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Ya Girl/Moo'N'Shine Custom Apparel 7925 N Tryon St #113 Charlotte, NC 28262			Khristy For Our Schools		marketing shirt order	
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$ 65.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
KWS	debit	C	6/1/2026	\$65.00	shirt order	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Staples 615 River Hwy Mooresville, NC 28117			Khristy For Our Schools		marketing table and banner	
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$ 118.94	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
KWS	debit	K	6/1/2026	\$58.70	table	
KWS	debit	K	6/1/2026	\$60.24	banner	
5. Total only this Page					\$ 338.01	
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 338.01	
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)						

Aggregated Non-Media Expenditures

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

Page 1 of 1

Amendment
☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable) Khristy For Our Schools					2. ID Number	
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
☐ Add ☐ Remove	KWS	debit	K	3/9/2026	\$ 26.68	business cards
☐ Add ☐ Remove	KWS	debit	B	3/30/2026	\$ 18.00	canva subscription
☐ Add ☐ Remove	KWS	debit	B	3/30/2026	\$ 4.81	UPS Store laminating
☐ Add ☐ Remove	KWS	debit	C	4/17/2026	\$ 2.00	Facebook Ads
☐ Add ☐ Remove	KWS	debit	B	4/30/2026	\$ 18.00	Canva subscription
☐ Add ☐ Remove	KWS	debit	K	5/8/2026	\$ 10.94	Walmart- paper
☐ Add ☐ Remove	KWS	debit	K	5/11/2026	\$ 24.91	Amazon- paper and cutter
☐ Add ☐ Remove	KWS	debit	C	5/13/2026	\$ 31.94	Walmart- cupcakes for event
☐ Add ☐ Remove	KWS	debit	C	5/14/2026	\$ 48.15	Pooter Pop- event gifts
☐ Add ☐ Remove	KWS	debit	C	5/21/2026	\$ 50.00	USPS money order event fee
☐ Add ☐ Remove	KWS	debit	C	5/21/2026	\$ 2.55	USPS money order fee
☐ Add ☐ Remove	KWS	debit	K	5/22/2026	\$ 39.00	PO Box rental USPS
☐ Add ☐ Remove	KWS	debit	C	5/27/2026	\$ 29.19	Amazon- event shirt, tablecloth. Terrell Fest
☐ Add ☐ Remove	KWS	debit	C	5/27/2026	\$ 10.69	Amazon- table decor Terrell Fest
☐ Add ☐ Remove	KWS	debit	C	6/1/2026	\$ 39.46	candy for Terrell Fest giveaways
☐ Add ☐ Remove	KWS	debit	B	6/1/2026	\$ 18.00	Canva subscription
☐ Add ☐ Remove	KWS	debit	C	6/1/2026	\$ 42.79	Amazon- button maker
☐ Add ☐ Remove	KWS	debit	B	6/1/2026	\$ 18.00	Canva subscription
☐ Add ☐ Remove					\$	
☐ Add ☐ Remove					\$	
4. Total only this Page					\$435.11	
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$435.11	
6. Purpose Codes (List detailed expenditure code in (d) above)						
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)						

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	
Khristy For Our Schools					
3. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
Khristy Womack Smith PO Box 121 Terrell NC 28682 704-293-9585		☒ Candidate ☐ PAC		4/10/2026	
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☒ County: ☐ State ☐ Municipality:		\$ 14.35	
		f. Purpose Code		j. Election Sum to Date	
		P		\$ 80.76	
b. Job Title/Profession		c. Employer's Name/Specific Field		k. Account Code	
homemaker		none		KWS	
l. Form of Payment		m. Required Remarks		n. Date (mm/dd/yyyy)	
personal CC		amazon paper		4/10/2026	
				\$ 14.35	
3. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
Khristy Womack Smith PO Box 121 Terrell NC 28682 704-293-9585		☒ Candidate ☐ PAC		5/14/2026	
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☒ County: ☐ State ☐ Municipality:		\$ 6.41	
		f. Purpose Code		j. Election Sum to Date	
		P		\$ 80.76	
b. Job Title/Profession		c. Employer's Name/Specific Field		k. Account Code	
homemaker		none		KWS	
l. Form of Payment		m. Required Remarks		n. Date (mm/dd/yyyy)	
cash		balloons for event from Dollar Tree		5/14/2026	
				\$ 6.41	
3. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
Khristy Womack Smith PO Box 121 Terrell NC 28682 704-293-9585		☒ Candidate ☐ PAC		12/8/2026	
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☒ County: ☐ State ☐ Municipality:		\$ 50.00	
		f. Purpose Code		j. Election Sum to Date	
		P		\$ 80.76	
b. Job Title/Profession		c. Employer's Name/Specific Field		k. Account Code	
homemaker		none		KWS	
l. Form of Payment		m. Required Remarks		n. Date (mm/dd/yyyy)	
cash		PO Box fee		12/8/2025	
				\$ 50.00	
4. Total only this Page				\$ 70.76	
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 80.76	
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)					

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	
Khristy For Our Schools					
3. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
Khristy Womack Smith PO Box 121 Terrell NC 28682		☒ Candidate ☐ PAC		12/9/2026	
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☒ County: ☐ State ☐ Municipality:		\$ 10.00	
		f. Purpose Code		j. Election Sum to Date	
		P		\$ 80.76	
b. Job Title/Profession		c. Employer's Name/Specific Field		k. Account Code	
homemaker		none		KWS	
l. Form of Payment		m. Required Remarks		n. Date (mm/dd/yyyy)	
cash		campaign filing fee		12/9/2025	
				\$ 10.00	
3. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
		☐ Candidate ☐ PAC			
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
		f. Purpose Code		j. Election Sum to Date	
				\$	
b. Job Title/Profession		c. Employer's Name/Specific Field		k. Account Code	
l. Form of Payment		m. Required Remarks		n. Date (mm/dd/yyyy)	
				\$	
3. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
		☐ Candidate ☐ PAC			
		☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
		f. Purpose Code		j. Election Sum to Date	
				\$	
b. Job Title/Profession		c. Employer's Name/Specific Field		k. Account Code	
l. Form of Payment		m. Required Remarks		n. Date (mm/dd/yyyy)	
				\$	
4. Total only this Page				\$ 10.00	
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 80.76	
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)					

In-Kind Contributions

Amendment
Pg 1 of 1 ☒ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Khristy For Our Schools			
3. Contributor Information ☒ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
NC Democratic Party 220 Hillsborough St Raleigh, NC 27603		☐ Individual	votebuilder platform
		☐ Candidate	
		☒ Party	
		☐ PAC	
		☐ Referendum	d. Election Sum to Date
		☐ Other Receipt Source	\$ 500.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Votebuilder Platform		3/23/2026	\$ 500.00
			\$
			\$
3. Contributor Information ☒ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Khristy Womack Smith PO Box 121 Terrell, NC 28682		☐ Individual	paper balloons PO BOX fee
		☒ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	d. Election Sum to Date
		☐ Other Receipt Source	\$ 80.76
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Amazon purchase- paper		4/10/2026	\$ 14.35
Dollar Tree- balloons for event		5/14/2026	\$ 6.41
PO Box Fee		12/8/2025	\$ 50.00
3. Contributor Information ☒ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Khristy Womack Smith POBox 121 Terrell, NC 28682		☐ Individual	filing fee
		☒ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	d. Election Sum to Date
		☐ Other Receipt Source	\$ 80.76
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Campaign Filing Fee		12/9/2026	\$ 10.00
			\$
			\$
4. Total only this Page			\$ 580.76
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 580.76