

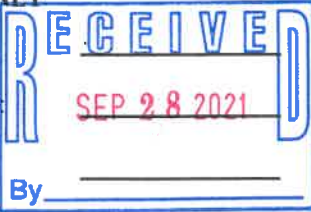
# Disclosure Report Cover

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

|  |   |  |   |
|--|---|--|---|
| <b>1. Committee Information</b>  |   |  |   |
| <b>a. Full Name</b>  |   | <b>c. ID Number</b>  |   |
| Ivey Robinson for Newton Council   |   |  |   |
| <b>b. Mailing Address (include City, State and Zip Code)</b>   |   | <b>d. Date Filed</b>   |   |
| PO BOX 912<br>Newton, NC 28658   |   | 9/28/2021  |   |
|  |   | <b>e. Phone Number</b>   |   |
|  |   | 828-238-1004   |   |
| <b>2. Report Year</b>  | <b>3. Period Start Date (mm/dd/yy)</b>  | <b>4. Period End Date (mm/dd/yy)</b>   | <b>5. Treasurer Full Name</b>                                       |
| 2021   | 7/15/2021   | 9/21/2021  | Jayana Linder   |
| <b>6. Type of Committee (Check One)</b>  |   | <b>9. Type of Report (check only one type of report from one category)</b>   |   |
| <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party<br><input type="checkbox"/> PAC <input type="checkbox"/> Referendum<br><input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser<br><input type="checkbox"/> Legal Expense Fund   |   | <b>Municipal</b><br><input type="checkbox"/> Organizational<br><input checked="" type="checkbox"/> Thirty-five day<br><input type="checkbox"/> Pre-primary<br><input type="checkbox"/> Pre-election<br><input type="checkbox"/> Pre-runoff<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special |   |
| <b>7. Type of Fund (if applicable, check one)</b>  |   | <b>State/County</b>  |   |
| <input type="checkbox"/> "Booster Fund"<br><input type="checkbox"/> Building Fund<br><br><input type="checkbox"/> Other:   |   | <input type="checkbox"/> Organizational<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> First<br><input type="checkbox"/> Second<br><input type="checkbox"/> Third<br><input type="checkbox"/> Fourth<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special                    |   |
| <b>8. Number of Fundraisers this Report</b>  |   | <b>10. Special Report Name</b>   |   |
|  |   |  |   |
| <b>11. Account Information</b>   |   | <b>11. Account Information</b>   |   |
| <b>a. Financial Institution Full Name</b>  |   | <b>a. Financial Institution Full Name</b>  |   |
| People Bank  |   |  |   |
| <b>b. Purpose</b>  | <b>c. Account Code</b>  | <b>b. Purpose</b>  | <b>c. Account Code</b>  |
| Campaign Acct  | Love  |  |   |
|  | <b>d. Period Begin Balance</b>  |  | <b>d. Period Begin Balance</b>                                      |
|  | \$ 110.00   |  | \$  |
| <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 of Elections. |   |  |   |
| Jayana Linder  |   | 9/28/2021  |   |
| Printed Name of Signer   |   | Signature of Appointed Treasurer   |   |
| <b>FOR OFFICE USE ONLY</b>   |   |  |   |
| Date Received:   |  | Employee:  | _____   |
| Date Postmarked:   |   | Employee:  | _____   |
| Date Scanned:  |   | Employee:  | _____   |
| Date Data Entered:   |   | Employee:  | _____   |
|  |   |  | <b>Delivery Method</b>  |
|  |   |  | <input type="checkbox"/> Normal Mail                                |
|  |   |  | <input type="checkbox"/> Registered Mail                            |
|  |   |  | <input type="checkbox"/> Hand Delivered                             |
|  |   |  | <input type="checkbox"/> Electronically Filed                       |
|  |   |  | <input type="checkbox"/> Signer has not received mandatory training |
| <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.  |   |  |   |

# 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                     |  |
|---|--|------------------------------------|--|----------------------------------|--|
| Ivey Robinson for Newton Council  |  | 35 Day                             |  |                                  |  |
| <b>Start of Election Cycle:</b> <b>January 1,</b> <b>2021</b>                       |  | <b>Total this Reporting Period</b> |  | <b>Total this Election Cycle</b> |  |
| <b>4) Cash on Hand at Start</b>   |  | \$ 110.00                          |  | \$ 0.00                          |  |
| <b>RECEIPTS</b>   |  |                                    |  |                                  |  |
| <b>5) Aggregated Contributions from Individuals</b> (CRO-1205)                      |  | \$                                 |  | \$                               |  |
| <b>6) Contributions from Individuals</b> (CRO-1210)                                 |  | \$ 2,079.09                        |  | \$ 2,351.82                      |  |
| <b>7) Contributions from Political Party Committees</b> (CRO-1220)                  |  | \$                                 |  | \$                               |  |
| <b>8) Contributions from Other Political Committees</b> (CRO-1230)                  |  | \$                                 |  | \$                               |  |
| <b>9) Loan Proceeds</b> (CRO-1410)  |  | \$                                 |  | \$                               |  |
| <b>10) Refunds/Reimbursements To the Committee</b> (CRO-1240)                       |  | \$                                 |  | \$                               |  |
| <b>11) Other Receipt Sources</b>  |  |                                    |  |                                  |  |
| <b>11a) Interest on Bank Accounts</b> (CRO-1250)                                    |  | \$                                 |  | \$                               |  |
| <b>11b) Contributions from Not-for-Profit Organizations</b> (CRO-1250)              |  | \$                                 |  | \$                               |  |
| <b>11c) Outside Sources of Income</b> (CRO-1250)                                    |  | \$                                 |  | \$                               |  |
| <b>11d) Legal Expense Fund – Other Sources</b> (CRO-1270)                           |  | \$                                 |  | \$                               |  |
| <b>11 e) Exempt Purchase Price Sales</b> (CRO-1265)                                 |  | \$                                 |  | \$                               |  |
| <b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) |  | \$ 2,079.09                        |  | \$ 2,351.82                      |  |
| <b>EXPENDITURES</b>   |  |                                    |  |                                  |  |
| <b>13) Disbursements</b>  |  |                                    |  |                                  |  |
| <b>13a) Operating Expenditures</b> (CRO-1310)                                       |  | \$ 1,255.94                        |  | \$ 1,255.94                      |  |
| <b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)             |  | \$                                 |  | \$                               |  |
| <b>13c) Coordinated Party Expenditures</b> (CRO-1310)                               |  | \$                                 |  | \$                               |  |
| <b>14) Aggregated Non-Media Expenditures</b> (CRO-1315)                             |  | \$                                 |  | \$                               |  |
| <b>15) Loan Repayments</b> (CRO-1420)   |  | \$                                 |  | \$                               |  |
| <b>16) Refunds/Reimbursements From the Committee</b> (CRO-1320)                     |  | \$                                 |  | \$ 50.00                         |  |
| <b>17) In-Kind Contributions</b> (CRO-1510)   |  | \$ 669.09                          |  | \$ 781.82                        |  |
| <b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)          |  | \$ 1,925.03                        |  | \$ 2,087.76                      |  |
| <b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18) |  | \$ 264.06                          |  | \$ 264.06                        |  |
| <b>ADDITIONAL INFORMATION</b>   |  |                                    |  |                                  |  |
| <b>20) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)                  |  | \$                                 |  |                                  |  |
| <b>21) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)           |  | \$                                 |  |                                  |  |
| <b>22) Debts and Obligations owed By the Committee</b> (CRO-1610)                   |  | \$                                 |  |                                  |  |
| <b>23) Debts and Obligations owed To the Committee</b> (CRO-1620)                   |  | \$                                 |  |                                  |  |
| <b>24) Account Transfers Within the Committee</b> (CRO-1720)                        |  | \$                                 |  |                                  |  |
| <b>25) Administrative Support</b> (CRO-1710)  |  | \$                                 |  | \$                               |  |
| <b>26) Forgiven Loans</b> (CRO-1440)  |  | \$                                 |  | \$                               |  |
| <b>27) 48-Hour Notice Reports Sum</b> (CRO-2220)                                    |  | \$                                 |  | \$                               |  |
| <b>28) Contributions to be Refunded</b> (CRO-1215)                                  |  | \$                                 |  | \$                               |  |

# 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> |  |
| Ivey Robinson for Newton Council  |                        |                           |  |                             |                                |                     |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |  |                             |                                |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                     |  |
| Louise M. Judd<br>2044 12 <sup>th</sup> St Dr Nw<br>Hickory, NC 28601   |                        |                           | No Job Title                             |                             |                                |                     |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                     |  |
|   |                        |                           | Not Employed                             |                             | <b>e. Election Sum to Date</b> |                     |  |
|   |                        |                           |  |                             | \$ 25.00                       |                     |  |
| <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"/>  | Love                   | Check                     |  | 7/25/2021                   | \$ 25.00                       |                     |  |
| <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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                     |  |
| Joan E. Gardner<br>8736 Popular Ln<br>Sherrills Ford, NC 28673<br>704-662-2045                                  |                        |                           | Real Estate Agent                        |                             |                                |                     |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                     |  |
|   |                        |                           | Newport Properties<br>Real Estate        |                             | <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"/>  | Love                   | Check                     |  | 7/27/2021                   | \$ 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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                     |  |
| Colleen Borst<br>3836 16 <sup>th</sup> St Ne<br>Hickory, NC 28601   |                        |                           | No Job Title                             |                             |                                |                     |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                     |  |
|   |                        |                           | Not Employed                             |                             | <b>e. Election Sum to Date</b> |                     |  |
|   |                        |                           |  |                             | \$ 25.00                       |                     |  |
| <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"/>  | Love                   | Check                     |  | 7/27/2021                   | \$ 25.00                       |                     |  |
| <input type="checkbox"/>  |                        |                           |  |                             | \$                             |                     |  |
| <input type="checkbox"/>  |                        |                           |  |                             | \$                             |                     |  |
| <b>4. Total only this Page</b>  |                        |                           |  |                             |                                | \$ 250.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> |                        |                           |  |                             |                                | \$ 2,079.09         |  |

# 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>            |  |
| Ivey Robinson for Newton Council  |                        |                           |  |                             |                                |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |  |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
| Darlene Hatchett<br>2274 Columbine Dr<br>Newton, NC 28658   |                        |                           | No Job Title                             |                             |                                |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|   |                        |                           | Not Employed                             |                             |                                |  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |  |                             | \$ 25.00                       |  |
| <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"/>  |                        | In-Kind                   | Parade Entry Fe                          | 7/27/2021                   | \$ 25.00                       |  |
| <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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
| Kiya Hightower<br>406 S Main Ave<br>Newton, NC 28658<br>704-297-8457  |                        |                           | No Job Title                             |                             |                                |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|   |                        |                           | Not Employed                             |                             |                                |  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |  |                             | \$ 103.50                      |  |
| <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"/>  |                        | In-Kind                   | Campaign Sign                            | 7/31/2021                   | \$ 53.50                       |  |
| <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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
| Mayranda Parks<br>113 9 <sup>th</sup> St Se<br>Conover, NC 28613<br>828-896-4873                                |                        |                           | Daycare Teacher                          |                             |                                |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|   |                        |                           | Kinder Care Learning Center              |                             |                                |  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |  |                             | \$ 207.00                      |  |
| <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"/>  |                        | In-Kind                   | Campaign Sign                            | 7/24/2021                   | \$ 100.00                      |  |
| <input type="checkbox"/>  |                        | In-Kind                   | Campaign Sign                            | 7/31/2021                   | \$ 107.00                      |  |
| <input type="checkbox"/>  |                        |                           |  |                             | \$                             |  |
| <b>4. Total only this Page</b>  |                        |                           |  |                             | \$ 285.50                      |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> |                        |                           |  |                             | \$ 2,079.09                    |  |

# 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>            |  |
| Ivey Robinson for Newton Council  |                        |                           |  |                             |                                |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |  |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>             |                             | <b>d. Comments</b>             |  |
| Raymond Robinson<br>406 S Main Ave<br>Newton, NC 28658<br>704-390-5544  |                        |                           | No Job Title                               |                             |                                |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b>   |                             |                                |  |
|   |                        |                           | Not Employed                               |                             |                                |  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |  |                             | \$ 157.73                      |  |
| <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"/>  | Love                   | Cash                      |  | 8/2/2021                    | \$ 50.00                       |  |
| <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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>             |                             | <b>d. Comments</b>             |  |
| Ivey Robinson<br>406 S Main Ave<br>Newton, NC 28658<br>704-418-9012   |                        |                           | Pastor                                     |                             |                                |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b>   |                             |                                |  |
|   |                        |                           | Supernatural Acts of<br>God Worship Center |                             |                                |  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |  |                             | \$ 155.00                      |  |
| <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"/>  | Love                   | Cash                      |  | 8/2/2021                    | \$ 50.00                       |  |
| <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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>             |                             | <b>d. Comments</b>             |  |
| Lucy Phelps<br>1070 Pocno Place<br>Newton, NC 28658<br>704-477-6987   |                        |                           | CNA  |                             |                                |  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b>   |                             |                                |  |
|   |                        |                           | All Care Links                             |                             |                                |  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |  |                             | \$ 960.00                      |  |
| <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"/>  | Love                   | Check                     |  | 8/6/2021                    | \$ 460.00                      |  |
| <input type="checkbox"/>  | Love                   | Check                     |  | 9/14/2021                   | \$ 500.00                      |  |
| <input type="checkbox"/>  |                        |                           |  |                             | \$                             |  |
| <b>4. Total only this Page</b>  |                        |                           |  |                             | \$ 1,060.00                    |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> |                        |                           |  |                             | \$ 2,079.09                    |  |

# 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>            |  |
| Ivey Robinson for Newton Council   |                        |                           |  |                             |                                |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |  |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>   |                             | <b>d. Comments</b>             |  |
| David Ethridge<br>704 N Main Ave<br>Newton, NC 28658   |                        |                           | Sales Clerk  |                             |                                |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Raised by The South                        |                             |                                |  |
|  |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |  |                             | \$ 228.55                      |  |
| <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"/>   |                        | In-kind                   | Campaign Stickr  | 8/10/2021                   | \$ 228.55                      |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>   |                             | <b>d. Comments</b>             |  |
| Ivey Robinson<br>406 S Main Ave<br>Newton, Nc 28658  |                        |                           | Pastor   |                             |                                |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Supernatural Acts of God<br>Worship Center |                             |                                |  |
|  |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |  |                             | \$ 231.29                      |  |
| <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"/>   |                        | In-Kind                   | Parade Decor   | 8/17/2021                   | \$ 24.52                       |  |
| <input type="checkbox"/>   |                        | In-Kind                   | Parade Decor   | 8/17/2021                   | \$ 51.77                       |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>   |                             | <b>d. Comments</b>             |  |
| Ivey Robinson<br>406 S Main Ave<br>Newton, NC 28658  |                        |                           | Pastor   |                             |                                |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Supernatural Acts of God<br>Worship Center |                             |                                |  |
|  |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |  |                             | \$ 304.91                      |  |
| <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"/>   |                        | In-Kind                   | Candy & Table  | 8/19/2021                   | \$ 41.63                       |  |
| <input type="checkbox"/>   |                        | In-Kind                   | Flyer Copies   | 8/19/2021                   | \$ 31.99                       |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$                             |  |
| <b>4. Total only this Page</b>   |                        |                           |  |                             | \$ 378.46                      |  |
| <b>5. Total of ALL CRO-1210 Pages</b>  |                        |                           |  |                             | \$ 2,079.09                    |  |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>                         |                        |                           |  |                             |                                |  |

# 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>            |  |
| Ivey Robinson for Newton Council   |                        |                           |  |                             |                                |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |  |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>             |                             | <b>d. Comments</b>             |  |
| Raymond Robinson<br>406 S Main Ave<br>Newton, NC 28658<br>704-390-5544                         |                        |                           | No Job Title                               |                             |                                |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b>   |                             |                                |  |
|  |                        |                           | Not Employed                               |                             |                                |  |
|  |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |  |                             | \$ 212.86                      |  |
| <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"/>   |                        | In- Kind                  | Sign Holder Tie                            | 8/19/2021                   | \$ 5.13                        |  |
| <input type="checkbox"/>   | Love                   | Cash                      |  | 8/21/201                    | \$ 50.00                       |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>             |                             | <b>d. Comments</b>             |  |
| Ivey Robinson<br>406 S Main Ave<br>Newton, NC 28658  |                        |                           | Pastor                                     |                             |                                |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b>   |                             |                                |  |
|  |                        |                           | Supernatural Acts of God<br>Worship Center |                             |                                |  |
|  |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |  |                             | \$ 354.91                      |  |
| <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"/>   | Love                   | Cash                      |  | 8/21/2021                   | \$ 50.00                       |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>             |                             | <b>d. Comments</b>             |  |
|  |                        |                           |  |                             |                                |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b>   |                             |                                |  |
|  |                        |                           |  |                             |                                |  |
|  |                        |                           |  |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |  |                             | \$                             |  |
| <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"/>   |                        |                           |  |                             | \$                             |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$                             |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$                             |  |
| <b>4. Total only this Page</b>   |                        |                           |  |                             | \$ 105.13                      |  |
| <b>5. Total of ALL CRO-1210 Pages</b>  |                        |                           |  |                             | \$ 2,079.09                    |  |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>                         |                        |                           |  |                             |                                |  |

# 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>                 |
| Ivey Robinson for Newton Council  |                    |                 |                      |   |  |                                     |
| <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<br>(include city, state, & zip)   |                    |                 |                      | b. Coordinated Committee Name   |  | d. Comments                         |
| Signs on the Cheap<br>1525A Stonehollow Dr. #100<br>Austin, TX 78758<br>1(866) 661-9239   |                    |                 |                      | c. Level Registered (Specify)   |  | e. Election Sum to Date             |
|   |                    |                 |                      | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: |  |                                     |
|   |                    |                 |                      | City of Newton  |  |                                     |
| f. Account Code   | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount   | k. Required Remarks                                      |                                     |
| Love  | Debit              | B               | 07/30/2021           | \$ 368.66   | Campaign Yard Signs                                      |                                     |
| Love  | Debit              | B               | 08/25/2021           | \$ 379.83   | Campaign Yard Signs                                      |                                     |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                    |                 |                      |   |  |                                     |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)   |                    |                 |                      | b. Coordinated Committee Name   |  | d. Comments                         |
| KFC<br>1916 E Main St<br>Lincolnton, NC 28092<br>(704) 735-4671   |                    |                 |                      | c. Level Registered (Specify)   |  | e. Election Sum to Date             |
|   |                    |                 |                      | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: |  |                                     |
|   |                    |                 |                      | City of Newton  |  |                                     |
| f. Account Code   | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount   | k. Required Remarks                                      |                                     |
| Love  | Debit              | O               | 08/03/2021           | \$ 29.95  | Feed Volunteers who attended the first Campaign meeting. |                                     |
|   |                    |                 |                      | \$  |  |                                     |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                    |                 |                      |   |  |                                     |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)   |                    |                 |                      | b. Coordinated Committee Name   |  | d. Comments                         |
| Dollar Tree<br>419 West A. Street<br>Newton, NC 28645<br>(828) 468-6084   |                    |                 |                      | c. Level Registered (Specify)   |  | e. Election Sum to Date             |
|   |                    |                 |                      | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: |  |                                     |
|   |                    |                 |                      | City of Newton  |  |                                     |
| f. Account Code   | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount   | k. Required Remarks                                      |                                     |
| Love  | Debit              | K               | 08/09/2021           | \$ 12.84  | Paper, Pencils, Markers                                  |                                     |
|   |                    |                 |                      | \$  |  |                                     |
| <b>5. Total only this Page</b>  |                    |                 |                      |   |  | \$ 791.28                           |
| <b>6. Total of ALL CRO-1310 Pages</b>   |                    |                 |                      |   |  | \$ 1,255.94                         |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><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>  |  |
| Ivey Robinson for Newton Council  |                           |                        |                             |   |   |  |  |
| <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><br>(include city, state, & zip)  |                           |                        |                             | <b>b. Coordinated Committee Name</b>  |   | <b>d. Comments</b>   |  |
| Office Max/Depot<br>1858 Catawba Valley Blvd SE<br>Hickory, NC 28602<br>(828) 322-4053  |                           |                        |                             |   |   |  |  |
|   |                           |                        |                             | <b>c. Level Registered (Specify)</b>  |   | <b>e. Election Sum to Date</b>   |  |
|   |                           |                        |                             | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: |   | \$ 250.87  |  |
| City of Newton  |                           |                        |                             |   |   |  |  |
| <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>  |  |  |
| Love  | Debit                     | B                      | 08/10/2021                  | \$ 250.87   | Flyers, Banners, & Copies   |  |  |
|   |                           |                        |                             | \$  |   |  |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |                        |                             |   |   |  |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           |                        |                             | <b>b. Coordinated Committee Name</b>  |   | <b>d. Comments</b>   |  |
| Albe Graphics<br>230 S. College Ave.<br>Newton, NC 28658<br>(828) 465-2187  |                           |                        |                             |   |   | *Self Reported Mistake to Greg Larimore on 09/21/2021@4:30 p.m. correction will be made on Year End Report, as Mr. Larimore directed us to do. |  |
|   |                           |                        |                             | <b>c. Level Registered (Specify)</b>  |   | <b>e. Election Sum to Date</b>   |  |
|   |                           |                        |                             | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: |   | \$ 160.00  |  |
| City of Newton  |                           |                        |                             |   |   |  |  |
| <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>  |  |  |
| Love  | Cash withdrawl from ATM   | B                      | 09/15/2021                  | \$ 160.00   | Campaign t-shirts- no debit/checks on hand at the time                                    |  |  |
|   |                           |                        |                             | \$  |   |  |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |                        |                             |   |   |  |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           |                        |                             | <b>b. Coordinated Committee Name</b>  |   | <b>d. Comments</b>   |  |
| Northern Tool + Equipment<br>2770 Hwy. 70, SE<br>Newton, NC 28658<br>(828) 267-2360   |                           |                        |                             |   |   |  |  |
|   |                           |                        |                             | <b>c. Level Registered (Specify)</b>  |   | <b>e. Election Sum to Date</b>   |  |
|   |                           |                        |                             | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: |   | \$ 13.86   |  |
| City of Newton  |                           |                        |                             |   |   |  |  |
| <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>  |  |  |
| Love  | Credit                    | F                      | 09/18/2021                  | \$ 13.86  | 4-48pk of Driveway Markers for poster boards & 4 pks of cable ties to hold signs in place |  |  |
|   |                           |                        |                             | \$  |   |  |  |
| <b>5. Total only this Page</b>  |                           |                        |                             |   |   | \$ 424.73  |  |
| <b>6. Total of ALL CRO-1310 Pages</b>   |                           |                        |                             |   |   | \$ 1,255.94  |  |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><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>                 |  |
| Ivey Robinson for Newton Council  |                           |   |                             |  |                            |                                     |  |
| <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<br><i>(include city, state, &amp; zip)</i>                              |                           |   |                             | b. Coordinated Committee Name  |                            | d. Comments                         |  |
| Lowe's Home Centers, LLC<br>1550 21st Street Dr., SE<br>Hickory, NC 28602<br>(828) 304-9063                   |                           |   |                             | c. Level Registered (Specify)<br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: |                            | e. Election Sum to Date             |  |
|   |                           |   |                             | City of Newton   |                            | \$ 39.93                            |  |
| <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> |                                     |  |
| Love  | Debit                     | F   | 09/18/2021                  | \$ 39.93   | 6 Garden Fences/U-Post     |                                     |  |
|   |                           |   |                             | \$   |                            |                                     |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                      |                           |   |                             |  |                            |                                     |  |
| a. Full Name, Mailing Address & Phone<br><i>(include city, state, &amp; zip)</i>                              |                           |   |                             | b. Coordinated Committee Name  |                            | d. Comments                         |  |
|   |                           |   |                             | c. Level Registered (Specify)<br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality:            |                            | e. Election Sum to Date             |  |
|   |                           |   |                             |  |                            | \$                                  |  |
| <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> |                                     |  |
|   |                           |   |                             | \$   |                            |                                     |  |
|   |                           |   |                             | \$   |                            |                                     |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                      |                           |   |                             |  |                            |                                     |  |
| a. Full Name, Mailing Address & Phone<br><i>(include city, state, &amp; zip)</i>                              |                           |   |                             | b. Coordinated Committee Name  |                            | d. Comments                         |  |
|   |                           |   |                             | c. Level Registered (Specify)<br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality:            |                            | e. Election Sum to Date             |  |
|   |                           |   |                             | City of Newton   |                            | \$                                  |  |
| <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> |                                     |  |
|   |                           |   |                             | \$   |                            |                                     |  |
|   |                           |   |                             | \$   |                            |                                     |  |
| <b>5. Total only this Page</b>  |                           |   |                             |  |                            | \$ 39.93                            |  |
| <b>6. Total of ALL CRO-1310 Pages</b>   |                           |   |                             |  |                            | \$ 1,255.94                         |  |
| <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> <i>(List detailed expenditure code in (h.) above)</i>                                 |                           |   |                             |  |                            |                                     |  |
| A* - Media  |                           | B* - Printing   |                             | C* - Fundraising   |                            | D - To Another Candidate            |  |
| E - Salaries  |                           | F* - Equipment  |                             | G - Political Party  |                            | H* - Holding Public Office Expenses |  |
| I - Postage   |                           | J - Penalties   |                             | K* - Office Expenses   |                            | Q* - Donation to Legal Expense Fund |  |
| O* Other  |                           |   |                             |  |                            |                                     |  |
| <b>* Codes require detailed explanation in required remarks field (k)</b>                                     |                           |   |                             |  |                            |                                     |  |

# In-Kind Contributions

|   |
|---|
| Amendment   |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.

|  |  |  |   |
|--|--|--|---|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |  | <b>2. ID Number</b>  |   |
| Ivey Robinson for Newton Council   |  |  |   |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |   |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>                          |
| Darlene Hatchett<br>2274 Columbine Dr.<br>Newton, NC 28658   |  | <input checked="" type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |   |
|  |  |  | <b>d. Election Sum to Date</b><br>\$ 25.00  |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>                |
| Parade Entry Fee   |  | 07/27/2021   | \$ 25.00                                    |
|  |  |  | \$  |
|  |  |  | \$  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |   |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>                          |
| Kiya Hightower<br>406 S, Main Ave.<br>Newton, NC 28658<br>(704) 297-8457   |  | <input checked="" type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |   |
|  |  |  | <b>d. Election Sum to Date</b><br>\$ 103.50 |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>                |
| Campaign Yard Sign   |  | 07/31/2021   | \$ 53.50                                    |
|  |  |  | \$  |
|  |  |  | \$  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |   |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>                          |
| Mayranda Parks<br>113 9th St., SE<br>Conover, NC<br>28613<br>(828) 896-4873                                      |  | <input checked="" type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |   |
|  |  |  | <b>d. Election Sum to Date</b><br>\$ 207.00 |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>                |
| Campaign Yard Sign   |  | 07/24/2021   | \$ 100.00                                   |
| Campaign Yard Sign   |  | 07/31/2021   | \$ 107.00                                   |
|  |  |  | \$  |
| <b>4. Total only this Page</b>   |  |  | \$ 285.50                                   |
| <b>5. Total of ALL CRO-1510 Pages</b><br><i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> |  |  | \$ 669.09                                   |

# 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>  |                                |
| Ivey Robinson for Newton Council   |  |  |                                |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| David Ethridge<br>704 N. Main Ave.<br>Newton, NC 28658   |  | <input checked="" type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|  |  |  | <b>d. Election Sum to Date</b> |
|  |  |  | \$ \$228.55                    |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Campaign Stickers  |  | 08/10/2021   | \$ \$228.55                    |
|  |  |  | \$                             |
|  |  |  | \$                             |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Ivey Robinson<br>406 S. Main Ave.<br>Newton, NC 28658<br>(704) 418-9012  |  | <input type="checkbox"/> Individual<br><input checked="" type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|  |  |  | <b>d. Election Sum to Date</b> |
|  |  |  | \$ 231.29                      |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Parade Float Decorations   |  | 08/17/2021   | \$ 24.52                       |
| Parade Float Decorations   |  | 08/17/2021   | \$ 51.77                       |
|  |  |  | \$                             |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Ivey Robinson<br>406 S. Main Ave.<br>Newton, NC 28658<br>(704) 418-9012  |  | <input type="checkbox"/> Individual<br><input checked="" type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|  |  |  | <b>d. Election Sum to Date</b> |
|  |  |  | \$ 304.91                      |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Parade Float Candy & Vendor Table  |  | 08/19/2021   | \$ 41.63                       |
| Flyer copies for Parade  |  | 08/19/2021   | \$ 31.99                       |
|  |  |  | \$                             |
| <b>4. Total only this Page</b>   |  |  | \$ 378.46                      |
| <b>5. Total of ALL CRO-1510 Pages</b><br><i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> |  |  | \$ 669.09                      |

# 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>  |                                |
| Ivey Robinson for Newton Council   |  |  |                                |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Raymond Robinson<br>406 S. Main Ave.<br>Newton, NC 28658<br>(704) 390-5544                                       |  | <input checked="" type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|  |  |  | <b>d. Election Sum to Date</b> |
|  |  |  | \$ 162.86                      |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Sign Holder Ties   |  | 08/19/2021   | \$ 5.13                        |
|  |  |  | \$                             |
|  |  |  | \$                             |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
|  |  | <input type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source            |                                |
|  |  |  | <b>d. Election Sum to Date</b> |
|  |  |  | \$                             |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
|  |  |  | \$                             |
|  |  |  | \$                             |
|  |  |  | \$                             |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                   |  |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                 |  | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
|  |  | <input type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source            |                                |
|  |  |  | <b>d. Election Sum to Date</b> |
|  |  |  | \$                             |
| <b>e. Description</b>  |  | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
|  |  |  | \$                             |
|  |  |  | \$                             |
|  |  |  | \$                             |
| <b>4. Total only this Page</b>   |  | \$ 5.13  |                                |
| <b>5. Total of ALL CRO-1510 Pages</b><br><i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> |  | \$ 669.09  |                                |