Disclosure Re	Yes DE No								
Use this form for ge	neral report and committee in to update information	informat	ion, must be	signed	and sub	mitted along with otl	her detailed forms CEIVED		
1. Committee Info							00/3/2020		
a. Full Name							c. ID Number		
Hickman for Sc	hool Board						DDCSXOrd of Elections d. Date Filed		
b. Mailing Address (inc	lude City, State and Zip Code)						d. Date Filed		
109 Captains W Blounts Creek, N							10/31/2022		
Distante Groom,							e. Phone Number		
			1		252-946-7748				
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period End Date (mm/dd/yy)			5. Treasurer Full	r Full Name		
2022 07/01/2022			10/22/20 ne of Report			Charles Hickma			
The same of the sa				(0	_	ly one type of report			
Candidate Camp		Munici	-		State/C		Referendum		
PAC Independent	Referendum		Organizational		-	Organizational	Organizational		
Expenditure Legal Expense F	Joint Fundraiser		Thirty-five day	у		Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)		Pre-primary			First	Final		
Booster Fund"			Pre-election			Second	Supplemental Final		
Building Fund			Pre-runoff		X	Third	Annual		
			Semi-annual			Fourth	Special		
Other:			Mid Year Year End			Semi-annual Mid Year	10. Special Report Name		
Guici.			Final			Year End	10. Special Report Name		
8. Number of Fund	raisers this Report		Special		1	Final	-		
1						Special			
11. Account Inform	nation			11. A	count l	Information			
a. Financial Institution	Full Name			a. Fina	ncial Inst	itution Full Name			
United Bank									
b. Purpose	c. Account Code			b. Pur	oose		c. Account Code		
Campaign Exper	ises 1								
	d. Period Begin Balanc	e					d. Period Begin Balance		
	\$ 940.73						\$		
CERTIFICATION									
the NC General Stat	nmittee or Fund is in compliates and that no funds are collicorrect and that I have been	mmingl	led with proh	ibited o	or other	non-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report		
	Hickman III	i tranico			Hicks	_	10/31/2022		
	Printed Name of Signer					ted Treasurer	Date		
FOR OFFICE USE O	ONLY						- "		
Date Received:			Employee:				Delivery Method ☐ Normal Mail		
Date Postmarke	d:		Employee:				Registered Mail Hand Delivered		
Date Scanned:	<u> </u>		Employee:				☐ Electronically Filed ☐ Signer has not received		
Date Data Enter	red:		Employee:				mandatory training		
Please Note: Th	is form cannot be used to an	nend cor	nmittee infor	mation	such as	the committee addre	ess, treasurer, assistant treasurer,		
	You must amend the State		oks informat Organizatior				ee changes.		

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information. 3. ID Number 1. Committee Full Name (and Fund if applicable) 2. Type of Report OCT 3 1 2022 DDCSY7 Hickman for School Board Third Quarter Plus Total this Total this January 1, 2022 Start of Election Cycle: Election Becalfort County Reporting Period **Board of Elections** \$940.73 4) Cash on Hand at Start \$940.73 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$884.00 \$ 1084.00 6) Contributions from Individuals \$3675.98 (CRO-1210) \$ 1805.98 7) Contributions from Political Party Committees \$ (CRO-1220) 8) Contributions from Other Political Committees \$ (CRO-1230) 9) Loan Proceeds (CRO-1410) \$ 0.00 \$1500.00 10) Refunds/Reimbursements To the Committee \$ (CRO-1240) 11) Other Receipt Sources 11a) Interest on Bank Accounts \$ (CRO-1250) \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ \$ 11c) Outside Sources of Income (CRO-1250) \$ \$ 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ 11 e) Exempt Purchase Price Sales (CRO-1265) \$ \$ 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) \$6259.98 \$2689.98 **EXPENDITURES** 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$1768.01 \$2737.28 13b) Contributions to Candidates/Political Committees (CRO-1310) 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 15) Loan Repayments (CRO-1420) \$ \$ 0.00 16) Refunds/Reimbursements From the Committee (CRO-1320) \$830.00 17) In-Kind Contributions (CRO-1510) \$485.98 \$ 485.98 TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$2253.99 \$4053.26 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$3147.45 \$1376.72 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$1500.00 22) Debts and Obligations owed By the Committee (CRO-1610) 23) Debts and Obligations owed To the Committee (CRO-1620) 24) Account Transfers Within the Committee (CRO-1720) \$ 25) Administrative Support (CRO-1710) \$ 26) Forgiven Loans \$ \$ (CRO-1440) 27) 48-Hour Notice Reports Sum \$ \$ (CRO-2220) 28) Contributions to be Refunded \$ (CRO-1215) \$

Aggregated Contributions from Individuals

Page

1 of 3

Amendment Ves

No

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

. Committee Fu	Il Name (and Fun	d if applicable)				Number L V	
Hickman for S	School Board				DDC	SY7 OCT 3 1 202	
. Contributor I	nformation						
Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount foodid of Election	
Add Remove	1	cash		07/21/202	22	\$ 20.00	
Add Remove	1	check		08/18/20	22	\$ 10.00	
Add Remove	1	cash		08/24/20	022	\$ 10.00	
Add	1			00/06/0	000	\$ 10.00	
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Remove Add	1	cash		08/27/2	022		
Remove Add	1	cash		08/27/	2022	\$ 20.00	
Remove	1	cash		08/27/	2022	\$ 10.00	
Add Remove	1	cash		08/27/	2022	\$ 30.00	
Add Remove	1	cash		08/27/2	022	\$ 10.00	
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Remove Add	1			09/11/20	122		
Remove Add	1	cash		09/11/20)22	\$ 10.00	
Remove Add	1	cash		09/11/20)22	\$ 25.00	
Remove	1	cash		09/12/20	022	\$ 10.00	
Add Remove	1	cash		09/12/20)22	\$ 30.00	
Add Remove	1	cash		09/12/2	022	\$ 10.00	
Add Remove	1	cash		09/12/2	2022	\$ 20.00	
Add Remove	1	cash		09/13/20	122	\$ 50.00	
Add				09/13/2		\$ 50.00	
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	L CRO-1205 F				\$ 88	4.00	
		ages ummary Page CRO-1100)			\$ 88	4.00	

Aggregated Contributions from Individuals

Page

2 of 3

Amendment

Yes

Yes 🔯

No

Optional form used to report NC Contributions From Individuals of \$50 or less 1. Committee Full Name (and Fund if applicable) 2. ID Number OCT 3 1 2 Hickman for School Board DDCSY7 3. Contributor Information **Beaufort Count** b. Account d. In-Kind e. Date f. Amountard of Elections a. Amend c. Form of Payment Code Description (mm/dd/yyyy) Add \$20.00 1 10/12//2022 cash Remove Add \$ 20.00 1 cash 10/12/2022 Remove Add 1 10/12/2022 \$ 10.00 cash Remove Add \$ 10.00 1 10/12/2022 cash Remove Add \$ 20.00 l 10/13/2022 cash Remove Add \$ 9.00 cash 10/13/2022 Remove Add 1 \$ 10.00 10/14/2022 cash Remove Add П 1 \$ 10.00 cash 10/15/2022 Remove Add 1 10/18/2022 \$ 40.00 cash Remove Add 10/18/2022 1 \$ 10.00 cash П Remove Add 1 10/18/2022 \$ 30.00 cash Remove Add \$ 10.00 1 cash 10/18/2022 Remove Add \$ 10.00 1 cash 10/18/2022 Remove Add \$ 10.00 10/18/2022 1 cash Remove Add 1 cash 10/18/2022 \$ 10.00 Remove П Add 10/18/2022 \$ 10.00 1 cash Remove Add

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5. Total of ALL CRO-1205 Pages

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cash

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cash

\$884.00

(This line must be on line 5 of Detailed Summary Page CRO-1100)
CRO-1205

NC State Board of Elections

April 2007

Aggregated Contributions from Individuals

Page

3 of 3

7	Yes	X	No	
_	1 65	LXI	140	

Optional form used to report NC Contributions From Individuals of \$50 or less RECEIVE 1. Committee Full Name (and Fund if applicable) 2. ID Number Hickman for School Board DDCSY7 3. Contributor Information **Beaufort Coul** d. In-Kind b. Account e. Date f. Amoun Board of Elections a. Amend c. Form of Payment Code Description (mm/dd/yyyy) Add \$40.00 1 10/20//2022 cash Remove Add \$ 10.00 1 cash 10/20/2022 Remove Add 1 10/20/2022 \$ 20.00 cash Remove Add \$ 10.00 1 cash 10/20/2022 Remove Add \$ Remove П Add \$ Remove Add \$ Remove Add \$ Remove Add \$ Remove Add \$ Remove

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5. Total of ALL CRO-1205 Pages

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\$884.00

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Contri	ibutions from	m Individuals				Pg		of	7		Yes	\boxtimes	No
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1. Comm	ittee Full Name	(and Fund if applical	ble)					2. I	D Num	ber	KE		IV
Hickma	an for School B	oard						DE	CSY7	7	0	CT 3	1 202
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	city, state, & zip)			Tax	Specia	list							
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	inity, NC 2781	7											
252-945	5-0985			H&R Block				e. El	e. Election Sum to Date				
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Nancy [cific Field								
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vvasiiiii	gion, NC 2766	9		Enchanted Gardens True Value of Bath			e. El	ection Su	ım to Da	ite			
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(This line	RO-1100	1)					.000				- 1		

Use this	form to report ind	ividual contributions	over \$50	0 or contri	butions unde	er \$50 if form CR	O 1205 is no	ot used FCEIVE	
1. Comn	nittee Full Name	(and Fund if applica	ble)				2. ID Nun		
Hickma	an for School B	oard					DDCSY7	OCT 3 1 2022	
3. Contr	ibutor Informati	on		Add	Rer	nove		Beaufort County	
a. Full Nar	me, Mailing Address	& Phone		b. Job Ti	itle/Profession		d. Comment	Board of Election	
(include	city, state, & zip)			Retired	d/Manager				
	R. Leary			c. Employ	yer's Name/Sp	ecific Field			
P.O. Bo	vinity, NC 2781	7		Wever	hauser				
252-402				Weyer	naasor		e. Election Sum to Date		
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descrip	ption	j. Date (mm/dd/yy	ууу)	k. Amount	
	1	IN-KIND	Lith	o Graphi	o Graphics 08/05/2022			\$ 115.98	
	1	cash		08/18/2022				\$ 20.00	
	1	IN-KIND		ifort Co. Republican / - Dinner Ticket 08/20/2022			2	\$ 50.00	
3. Contr	ibutor Informati	on		Add		nove			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profession			d. Comment	s	
(include	city, state, & zip)			Retired	d/Manager				
	R. Leary				yer's Name/Sp	ecific Field	1		
P.O. Box 33 Characteristy, NC 27817				Weyerhauser			landet a		
1	Chocowinity, NC 27817						e. Election S	um to Date	
252-402-5662							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descrip	ption	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check				08/22/2022	-	\$250.00	
	1	cash				08/24/2022		\$ 20.00	
	1	cash				09/20/2022		\$ 20.00	
3. Contr	ibutor Informati	on		Add	Ren	nove			
	ne, Mailing Address	& Phone		-	tle/Profession		d. Comment	S	
(include	city, state, & zip)			Retir	red/Man	lser			
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P.O. B	ox 33 winity, NC 278°	17							
	2-5662			Weye	erhauser		e. Election S	um to Date	
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	1	check				10/12/2022		\$ 100.00	
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4. Total only this Page						\$ 575.98			
5. Tota	of ALL CRO	1-1210 Pages					\$ 180	E 00	
(This lin	a must be on line 6 of	Detailed Summary Page	PO-1100	2)			₹ 180	5.98	

Contributions from Individuals

Amendment

Yes 🛛

No

		m Individuals		Pg	3 of	7	Yes X	No
				0 or contributions unde	er \$50 if form CR	O 1205 is no		
1. Comn	nittee Full Name ((and Fund if applica	ble)			2. ID Num	ber RECEI	/E
Hickma	an for School Bo	pard				DDCSY7	OCT 312	022
3. Contr	ibutor Informatio	on		Add Rem	nove			
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	s Beaufort Cou	inty
(include	city, state, & zip)			President			Board of Elect	ions
William	L. Cayton				- 1/4 - 201 - 1/4	-		
113 N. N	Main St.			c. Employer's Name/Spe	ecific Field	-		
Bath, NO 252-923	C 27808			Cayton Enterprize	es	e. Election Sum to Date		
252-925	-0300					\$100.00		
C D !	T	I. E. GD	1		T			
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a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	3	
(include	city, state, & zip)			Broker / Owner				
	W. O'Neal		c. Employer's Name/Spe	ocific Field	-			
The state of the s	Water St.							
252-94	en, NC 27810 5-7550			O'Neal and Assoc	ciates	e. Election St	ım to Date	
202 0 1	0,000					\$330.	00	
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		IN-KIND		ated shotgun/raffle	j. Date (mm/dd/yyyy)			
	1	IIN-KIND	Done		08/23/2022		\$320.00	
	1	cash			09/12/2022		\$ 10.00	
							\$	
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	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	ı	
(include	city, state, & zip)			Retired / Manage	ər			
Garland				c. Employer's Name/Spe				
	NC Hwy 33 E. Creek, NC 278	814						
252-322		,,,,		Nutrian		e. Election Su	ım to Date	
						\$70.00	0	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
	1	cash			08/18/2022		\$ 20.00	
							\$	
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5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$1805.98

Contr	ibutions fror	m Individuals				Pg	4 of	7	Yes No	
Use this t	form to report indi	vidual contributions of	ver \$50	or contri	ibutions					
1. Comm	ittee Full Name (and Fund if applical	ole)					2. ID Num	iber ECEVE	
	an for School Bo							DDCSY	OCT 3 1 2022	
	butor Informatio			Add		Rem	iove	1		
	ne, Mailing Address & city, state, & zip)	k Phone		b. Job Ti	itle/Profe	ssion		d. Comment	Board of Elections	
				Vice F	Preside	ent			of Elections	
Jimmie 135 Sho	ort Street			c. Emplo	yer's Na	me/Spe	cific Field			
Edward	, NC 27821			Walke	er Tire	Servi	ce			
252-670)-6071							e. Election Sum to Date		
								\$70.0	0	
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(include city, state, & zip)				Retired	d / Tea	cher				
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Winterville, NC 28590				Pitt Co	untv S	choo	ls			
					, -			e. Election St	um to Date	
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3. Contri	butor Informatio	n		Add		Rem	ove			
	ne, Mailing Address &	è Phone		b. Job Ti	tle/Profe	ssion		d. Comment	3	
	city, state, & zip)			Retire	ed / Gr	oup L	eader			
John V. 1559 Di	xon Road			c. Employ	yer's Nai	ne/Spe	cific Field			
Chocow	inity, NC 27817	7		1. 17.11.11.11.11.11.11.11.11.11.11.11.11.1			ientific /	e. Election Si	um to Data	
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		cash	-				08/15/2022		N 1505-1505	
		cash					09/01/2022		\$ 20.00	
		cash					10/17/2022		\$ 10.00	
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5. Total of ALL CRO-1210 Pages							\$ 180	5 08		
(This II.	a must be an line 6 of	Datailed Cumman, Page C	PO 1100	n				₩ 100k	5.50	

Contr	ibutions fro	m Individuals				Pg	5	of	7	Yes		No
SAME AND PARTY AND PERSONS ASSESSED.	THE RESIDENCE PROPERTY AND ADDRESS OF THE PERSON NAMED ADDRESS	vidual contributions of	SALES OF THE PERSON NAMED IN	or contr	ibution	s unde	r \$50 if form	CRC	And in case of the last of the	THE RESIDENCE IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER,		
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Hickr	man for School I	Board							DDCSY7	00	T 3	1 202
3. Contr	ibutor Informatio	on		Add		Ren	nove					
	ne, Mailing Address	& Phone		b. Job T	itle/Prof	ession			d. Comment	s Bec	ufort	County
	city, state, & zip)			Presid	ent					вод	d of E	lection
David (Clark st Main St.			c. Emplo	yer's N	ame/Spe	ecific Field					
Washir	igton, NC 2788	9		Day O	ne Cr	eative	, INC	-	e. Election Sum to Date			a day
252-72	1-8020							Ì	\$70.00			
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	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession					d. Comment	S		
Kelli Ca				Busine	ess Ar	alyst						
802 Ha	802 Hawthorne Drive				yer's Na	me/Spe	ecific Field					
	Whitsett, NC 252-320-3356			Gilbarco Veeder Root /				e. Election S	um to Date			
202 02				Fuel Distribution Equipment					\$100.	.00		11
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										\$		
3. Contr	ibutor Informatio	on		Add		Rem	iove					
	ne, Mailing Address &	& Phone		b. Job T	itle/Prof	ession			d. Comment	s		
(include	city, state, & zip)											
				c. Emplo	yer's Na	me/Spe	cific Field					
								-	e. Election S	um to Date		
									\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descri	ption		j. Date (mm/c	dd/yyy	y)	k. Amount		
										\$		
										\$		
										\$		
	4. Total only this Page				\$ 170.00							
5. Tota	5. Total of ALL CRO-1210 Pages									\$ 1805.98		

Contr	ibutions from	n Individuals			I	Pg	6of	7	Yes	×	No
green and the second	DESCRIPTION OF THE PROPERTY OF	vidual contributions of	SALAR	or contrib			r \$50 if form CR	CONTRACTOR DESCRIPTION AND ADDRESS OF THE PARTY OF THE PA	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUM	No. 11 No.	A. Maria and
1. Comm	ittee Full Name (and Fund if applica	ble)					2. ID Nun	nber KEC	, EII	/EL
Hickma	an for School Bo	oard						DDCSY7	OCT	312	2022
	butor Informatio			Add		-	ove	_			
	ne, Mailing Address &	& Phone		b. Job Tit	le/Profession	on		d. Comment	Board	ort Cou	unty
	city, state, & zip)			Physic	al Thera	apis	st .			DI LIGO	HOHS
Patricia 384 Mar	Garrison			c. Employer's Name/Specific Field							
Pantego	, NC 27860			Vidant				e. Election Sum to Date			
252-943	-4658										
		The second secon					-	\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descrip	tion		j. Date (mm/dd/yy	yyy)	k. Amount		
	1	cash					07/21/2022		\$40.00		
	1	cash					09/13/2022		\$10.00		
	1	cash		09/15/2022					\$ 20.00		
3. Contri	butor Informatio	on		Add	☐ R	lem	ove				
	ne, Mailing Address &	& Phone		b. Job Tit	le/Professio	on		d. Comment	S		
(include	city, state, & zip)	Comment and the second		Physic	cal Thera	apis	st				
	Patricia Garrison 384 Maple St. Pantego, NC 27860				er's Name/						
252-943				Vidant			e. Election S	um to Date			
							\$ 90.0	00			
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descrip	tion		j. Date (mm/dd/yy	yyy)	k. Amount		
	1	cash					10/14/2022		\$10.00		
	1	cash					10/17/2022	2	\$ 10.00		
									\$		
	butor Informatio			Add	□ R	lem	ove				
	ne, Mailing Address &	& Phone		b. Job Tit	le/Professio	on		d. Comment	S		
	city, state, & zip) B. Richardson			Office N	/lanager	•					
102 Du	dley Place			c. Employ	er's Name/	Spec	cific Field				
Washin 252-975	gton, NC 27889	9				nd S	Surveyor &	e. Election S	um to Data		
252-975)-34 <i>1</i> Z			Engine	эг			\$ 170.			
f. Prior	g. Account Code	h. Form of Payment	i, In-F	Cind Descrip	tion		j. Date (mm/dd/yy		k. Amount		
	1	cash					10/20/2022		\$ 20.00		
									\$		
			1 1						\$	-	
4. Total only this Page					\$ 110.00						
5. Total of ALL CRO-1210 Pages											
(This line must be on line 6 of Detailed Summany Bone CBO 1100)							\$ 180	5.98			

		m Individuals		Pg	7	of <u>7</u>	Yes No		
				0 or contributions und	ler \$50 if form (not used ECEVE		
		(and Fund if applica	ble)				umber		
Hickm	an for School B	oard				DDCS	OCT 3 1 2022		
	ibutor Informatio			Add 🗌 Re	move		Beaufort County		
	ne, Mailing Address of city, state, & zip)	& Phone		b. Job Title/Profession		d. Comm	Board of Elections		
				Retired Educato	r				
	S. Hickman ptains Walk Rd.			c. Employer's Name/S	pecific Field				
Blounts	Creek, NC 278			NC Department	of Public	e. Electio	e. Election Sum to Date		
252-946	5-7748			Instruction			50.00		
f. Prior	g. Account Code	h. Form of Payment	i In-	Kind Description	j. Date (mm/dd		k. Amount		
	1	cash	1	illina Description	10/21/2022		\$ 50.00		
	1	Casii	-	10/21/2022		_			
							\$		
				(4)			\$		
	ibutor Informatio			Add 🗌 Re	move				
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comm	ents		
(include	city, state, & zip)								
				c. Employer's Name/Sp	pecific Field				
						a Flastia	n Sum to Date		
							ii Suiii to Date		
	·	· · · · · · · · · · · · · · · · · · ·				\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd	l/yyyy)	k. Amount		
							\$		
							\$		
							\$		
3. Contr	ibutor Informati	on		Add 🔲 Re	move				
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comm	ents		
(include	city, state, & zip)								
				c. Employer's Name/S	pecific Field				
						a Floatio	n Sum to Date		
							ii Suiii to Date		
	,					\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd	l/yyyy)	k. Amount		
					1		\$		
							\$		
							\$		
4. Tota	l only this Pag	e				\$50	0.00		
The second second second	l of ALL CRO					\$ 1	805.98		
(This lin	e must be on line 6 of	Detailed Summary Page (CRO-110	0)		Ψ1	000.00		

Use this form to report non-monetary Use CRO-1215 if In-Kind Contributi	contr ons we	ibutions, ere or wil	donations, l be refund	goods or ed within	servi 7 da	ces provided to the	e comi	nittee or fund.	
1. Committee Full Name (and Fund	l if ap	plicable)					2. ID	Number	
			eri erik, bilania di minyor, miny meneri					OCT 3 1 2022	
		1.11					<u> </u>		
3. Contributor Information		Add	U_	Remove				Beaufori County	
a. Full Name, Mailing Address & Phone (include city, state, & zip)				Б. Тур		Contributor	c. Comments Board of Elections		
(include city, state, & zip)					✓ Individual Candidate				
William R. Leary				18	Part				
P.O. Box 33					PAC				
Chocowinity, NC 27817 252-402-5662					Refe	erendum	d. Ele	ction Sum to Date	
232-402-3002					Othe	er Receipt Source			
							\$ 165.98		
e. Description						f. Date (mm/dd/yy	уу)	g. Fair Market Amount	
Litho Graphics order		-				08/05/2022		\$ 115.98	
Beaufort County Republican Pa	ty - F	Reagan I	Day Dinne	er Ticket		08/20/2022		\$ 50.00	
								\$	
3. Contributor Information		Add		Remove	:				
a. Full Name, Mailing Address & Phone					e of C	Contributor	c. Con	nments	
(include city, state, & zip)					Indi	vidual			
Adam W. O'Neal						didate			
152 E. Water St.					Part				
Belhaven, NC 27810					PAC		1 771		
252-945-7550						erendum	d. Ele	ction Sum to Date	
		***			Othe	er Receipt Source	\$32	20.00	
e. Description					343	f. Date (mm/dd/yy	yy)	g. Fair Market Amount	
G - Force Arms 12 Guage Shots	jun					08/23/2022		\$320.00	
								\$	
								\$	
3. Contributor Information		Add		Remove					
a. Full Name, Mailing Address & Phone				b. Typ		Contributor	c. Con	ıments	
(include city, state, & zip)						vidual			
						didate			
				18	Party				
						rendum	d. Elec	tion Sum to Date	
						er Receipt Source			
P							\$		
e. Description						f. Date (mm/dd/yy	yy)	g. Fair Market Amount	
								\$	
								\$	
								\$	
4. Total only this Page							\$48	5.98	
5. Total of ALL CRO-1510 Pages								35.98	
(This line must be on line 17 of Detailed Su	mmary	Page CRO-	-1100)				Φ.		

In-Kind Contributions

Disbursem	ents			Pg	_1	of _2_	Yes	X	No
	report expenditures		ee for; operating ex	penses,	contributions	to candi	date/political		
THE RESIDENCE AND ASSOCIATED WITH THE PROPERTY OF THE PROPERTY	coordinated party ex 'ull Name (and Fund	CONTRACTOR DE LA CONTRA					2. ID Number		
Hickman for S		i ii applicable)					DDCSY7		
3. Type of Disb		se use separate C	CRO-1310 forms for	each t	vpe of Disbur	sement.)	AND RESIDENCE AN		
Operating E	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUM		ndidates/Political Commi				ated Party Expenditures	3	
4. Payee Inform	ation		Add		Remove		REC	FIVI	ED
a. Full Name, Maili	ing Address & Phone		b. Coordinated Com	mittee Na	ame	d. (Comments	m 8 . 8 . 6	
(include city, state,	& zip)						OCT :	3 1 202	22
Beaufort Cour	nty Board of Electi	ons							me Can
1308 Highland			c. Level Registered (S		_		Beaufor	t Count	tv
Washington, N	IC 27889		Federal	×	County:	-	Board of	Electio	ns
252-946-2321			State		Municipality:	e. E	Election Sum to Date		
						\$ 1	17.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	уу)	j. Amount	k. I	Required Remarks		
1	check		08/04/2022		\$17.00	2n	d District Statist	ics/ros	ster
					\$	_			
4. Payee Inform			Add		Remove				
	ing Address & Phone		b. Coordinated Com	nittee Na	ime	d. (Comments		
(include city, state,	& zip)								
Ingalls Printing			c Level Registered (S	inecify)					
107 Union Driv			c. Level Registered (Specify) Federal				7		
Washington, N 252-975-2056	C 27889		State Municipality:			e. F	e. Election Sum to Date		WHEE
232-913-2030									
						\$			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	yy)	j. Amount	k. F	Required Remarks		
1	check	Α	08/10/2022		\$330.25	Fo	our Banners		
1	check	Α	08/24/2022		\$ 480.38	Ra	ack Cards		
4. Payee Inform	ation		Add		Remove				
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Name			d. (Comments		
(include city, state,	& zip)								
Ingalls Printing	ILLC								
107 Union Driv			c. Level Registered (Specify) Federal County:						
Washington, N			State Municipality:			0.5	e. Election Sum to Date		
252-975-2056			State Municipality:						
							291.01		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	уу)	j. Amount	k. F	Required Remarks		
1	check	А	10/21/2022		\$480.38	Ra	ack Cards		
					\$				
5. Total only thi	is Page					\$1	308.01		
6. Total of ALL	CRO-1310 Pages								
	line 13a of Detailed Sum	5.0				\$1	768.01		
	line 13b of Detailed Sum					91	700.01		
THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUM	line 13c of Detailed Sum	CAMPAGE AND ADDRESS OF THE PARTY OF THE PART		xpenditu	res)				
A* - Media	es (List detailed exp B* - Printing	C* - Fund			D - To Aı	nother Co	ndidata		
E - Salaries	F* - Equipment						lic Office Expenses		
I - Postage	J - Penalties		ce Expenses			* - Donation to Legal Expense Fund			
O* - Other * Codes require	e detailed explanati	on in required w	marks field (b)						4000
Cours requir	e uctaneu expianau	on in required re	mains neu (n)						Acts of the

Disbursements Use this form to report expenditures committees and coordinated party e		Pg ee for; operating expenses,	2 of contributions to			
1. Committee Full Name (and Fur				2. ID Number		
Hickman for School Board	DDCSY7					
	ase use separate (CRO-1310 forms for each t	vpe of Disbursen			
Operating Expenses	NAME AND ADDRESS OF THE OWNER, TH	ndidates/Political Committees		pordinated Party Expenditures		
4. Payee Information		Add 🔲	Remove			
a. Full Name, Mailing Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state, & zip)						
Beaufort County Republican Pa 844 W 15th St.	arty	c. Level Registered (Specify)		OCT 3 1 2022		
Washington, NC 27889		Federal X	County:	Populari O		
252-495-4029		State	Municipality:	e. Election Sum to Date		
				\$50.00		
f. Account Code g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1 check	А	08/24/2022	\$ 50.00	Joint ad in Reagan Day Booklet		
			\$			
4. Payee Information		Add	Remove			
a. Full Name, Mailing Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state, & zip)						
SNI 106 Beechwood Rd. Washington, NC 27889		c. Level Registered (Specify) Federal	County:			
252-946-2361		State	Municipality:	e. Election Sum to Date		
				\$110.00		
f. Account Code g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1 check	A	10/03/2022	\$ 110.00	Banner on Beaufort County NOW		
			\$			
4. Payee Information		Add	Remove			
a. Full Name, Mailing Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state, & zip)						
The County Compass P.O. Box 460		c. Level Registered (Specify)				
Bayboro, NC 28515	Federal X	County:				
252-745-3155		State	Municipality:	e. Election Sum to Date		
-	I D C I			\$300.00		
f. Account Code g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1 check	A	10/22/2022	\$300.00	Half Page Ad (3 weeks)		
			\$			
5. Total only this Page				\$460.00		
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Su (This line goes in line 13b of Detailed Su (This line goes in line 13c of Detailed Su	mmary Page CRO-110	0 if Contrib to Candidates/Politic		\$ 1768.01		

7. Purpose Codes (List detailed expenditure code in (h.) above)

	The state of the s	And the second s
A* - Media	B* - Printing	C* - Fundraising
E Calorias	Et Faninment	C Delitical Dorty

E - Salaries
I - Postage F* - Equipment
J - Penalties O* - Other

G - Political Party K* - Office Expenses

D - To Another Candidate
H* - Holding Public Office Expenses
Q* - Donation to Legal Expense Fund

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

Outstanding Loans

				Americal				
Pg	1	of	1		Yes	X	No	

Use this form to repo	rt any outstanding	loans recei	ived durin	g a previous n	eporting period ar	nd until the loan is p	aDE MEIL		
1. Committee Full N	2. ID Number	NLCEIV							
Hickman for Sch	ool Board					DDCSY7	OCT 3 1 20		
3. Lender Informati	on		Add		Remove		Beaufori Coun		
a. Full Name, Mailing Ad			b. Job T	itle/Profession		d. Comments	Board of Electic		
(include city, state, & zip) Charles E. Hickman III Retired Business Own						e. Start Date (mr			
109 Captains Walk Rd. Blounts Creek, NC 27814				oyer's Name/Spe	cific Field		02/16/2022		
phone: 252-946-	Movies & Mercantile			f. End Date (mm/dd/yyyy)					
g. Rate	h. Security Pledged			I Ordete di I		not set			
				i. Original Lo		j. Remaining Loa	in Balance		
0 %	N/A			\$ 1500.00		\$ 1500.00			
k. Full Name of Lending I	nstitution					L Loan Number			
N/A						N/A			
3. Lender Information		□ A	dd		Remove				
a. Full Name, Mailing Add (include city, state, & zi			b. Job T	itle/Profession		d. Comments			
(include tity, state, & 21	h)								
						e. Start Date (mm/dd/yyyy)			
		c. Employer's Name/Specific Field			*.				
		v.				f. End Date (mm/dd/yyyy)			
						1. End Date (mile	au yyyy)		
g. Rate	h. Security Pledged			i. Original Los	ar Amount	j. Remaining Loa	n Balance		
%				s		s			
k. Full Name of Lending Is	nstitution					l. Loan Number			
	•								
3. Lender Informatio	m [] A	dd		Remove				
a. Full Name, Mailing Add (include city, state, & zip			b. Job Ti	tle/Profession		d. Comments			
						e. Start Date (mm	(Adhana)		
35. '0.			c. Employer's Name/Specific Field			C. State Date (misseud/yyyy)			
13.									
						f. End Date (mm/c	ld/yyyy)		
g. Rate	h. Security Pledged			i. Original Loa	a Amount	j. Remaining Loan	Balance		
%				\$		\$			
c. Full Name of Lending Institution					I. Loan Number				
	1.				1				
4. Total only this Page						\$1500.00			
5. Total of ALL CRO-	-1430 Pages								
(This line must be on line	21 of Detailed Summa	ry Page CRO	7-1100)			\$1500.00			