Disclosure	Report Cover	

Yes \boxtimes Use this form for general report and committee information, must be signed and submitted along with No other detailed forms. Do not use this form to update information

Amendment

rmation				
				c. ID Number
or School Board				7CQEQ6
lude City State and Zin Code)				
Village Drive				d. Date Filed
27012				03/04/2022
				e. Phone Number
				336-399-6374
3. Period Start Date (mr			5 Tragement	
	(mm/dd/y)		Donna B Par	
			nly one type of rep	ort from one category)
				Referendum
		nal	Organizational	Organizational
Joint Fundraiser	Thirty-five d	lay	Quarterly	Pre-referendum
(if applicable, check one)	Pre-primary		First	The second second
				Final Final
	Pre-runoff			Supplemental Final
				Annual
		ar		Special
				10. Special Report Name
raisers this Report				0
ation				
full Name				the second s
			rution x un riame	
c. Account Code		b. Purpose		c. Account Code
198	0HS			
d. Period Begin Balance	ce			d. Period Begin Balance
\$ 1816.89				\$
her non-disclosed fu	nds. I further	tutes and the	at no funds an	re commingled with is complete, true and
Printed Name of Signer	S	ignature of Appointe	ed Treasurer	07/12/2023 Date
NLY		- TF - AN		ναις
l:	Employee:			Delivery Method Normal Mail
	Employee:			Registered Mail
	Fimloweet			Electronically Filed
	Employee:			Electronically Filed Signer has not
	Employee:			Electronically Filed
	or School Board Elude City, State and Zip Code) I Village Drive 27012 3. Period Start Date (mm 05/01/2022 tee (Check One) aign Party Referendum Joint Fundraiser und (if applicable, check one) raisers this Report 0 ation full Name c. Account Code 198a d. Period Begin Balance \$ 1816.89 the Committee or Funct f Chapter 163 of the pher non-disclosed full I have been trained arsons Printed Name of Signer NLY	a. Period Start Date (mm/dd/yy) 3. Period Start Date (mm/dd/yy) 05/01/2022 06/ tee (Check One) aign Party Municipal Referendum Joint Fundraiser Ind (If applicable, check one) Pre-primary Pre-primary Pre-primary Pre-primary Image: Special of the NC General State ation raisers this Report o ation raisers this Report special o ation special o ation raisers this Report special o ation special o ation raisers this Report special o	or School Board Stude City, State and Zip Code) VIIIage Drive 7012 3. Period Start Date (mm/dd/yy) 05/01/2022 06/30/2022 tee (Check One) 9. Type of Report (check One) aign Party Municipal State/a Joint Fundraiser Pre-primary Pre-clection Pre-runoff Semi-annual Mid Year Pre-runoff Semi-annual Mid Year Year End Final Special 0 ation 11. Account I special 0 ation 11. Account Code b. Purpose 1980HS d. Period Begin Balance S 1816.89 he Cormittee or Fund is in compliance with all f f Chapter 163 of the NC General Statutes and th her non-disclosed funds. I f urther certify that t have been tra ined by the NC State Board of E	aude City, State and Zip Code) VIII age Drive 27012 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 05/01/2022 06/30/2022 05/01/2022 06/30/2022 tee (Check One) 9. Type of Report (check only one type of report) aign Party Municipal State/County aign Doint Fundraiser Thirty-five day Quarterly and Organizational Organizational Organizational (if applicable, check one) Pre-primary First Beering Pre-primary First Wild Year Semi-annual Semi-annual Wild Year Semi-annual Semi-annual Year End Mid Year Semi-annual Year End Special Final 0 Special Final 0 Special Special 10 Special Special 11 Account Code b. Purpose 1980HS d. Period Begin Balance s 1 1816.89 Signature of Appointed Treasurer

Please Note: This form cannot be used to amend committee information such as the committee address.

treasurer, assistant treasurer, custodian of	books information, or account information.
You must amend the Statement of Organizatio	n (CRO-2100A-E) to make committee changes.

CRO-1000

3

NC State Board of Elections

August 2008

Detailed Summary

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

Amendment

No

	Type of Repor	t	の表示を定当		lumber
Robert Barr for School Board 2r	nd Quarter			7CQEQ	6
	2022		Total this Reporting Period	3	Total this Election Cycle
4) Cash on Hand at Start		\$	1816.89	\$	an and any an
RECEIPTS					east that have
5) Aggregated Contributions from Individuals	(CRO-1205)			\$	
6) Contributions from Individuals	(CRO-1210)	\$	1602.82	\$	10314.32
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$		\$	
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, 11a	and 11e)	\$	1602.82	\$	10314.32
EXPENDITURES		P.S.			
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	2000.58	\$	2033.69
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$		\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$		\$	
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$		\$	
5) Loan Repayments	(CRO-1420)	\$		\$	
6) Refunds/Reimbursements From the Committee	(CRO-1320)	\$		\$	
7) In-Kind Contributions	(CRO-1510)	\$	452.82	\$	7314.32
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 c	ind 17)	\$	2453.40	\$	9348.01
9) Cash on Hand at End (Add lines 4 and 12 together, then subtract li		\$	966.31	\$	966.31
ADDITIONAL INFORMATION		Citize 1			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$			
2) Debts and Obligations owed By the Committee	(CRO-1610)	\$			
3) Debts and Obligations owed To the Committee	(CRO-1620)	\$			AVE CR
4) Account Transfers Within the Committee	(CRO-1720)	\$		and the second	CONTRACTOR OF
5) Administrative Support					a Barris Blog
6) Forgiven Loans	(CRO-1710)	\$		\$	
	(CRO-1440)	\$		\$	
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	1150.00	\$	1150.00
8) Contributions to be Refunded	(CRO- 1215)	\$		\$	

1. Com	mittee Full Name	(and Fund if applica	able)			2. ID N	ımber	
Robert	Barr for Scho	ol Board					7CQEQ	6
1000 C 100 C	ributor Informati			Add R	amove	E.S. P. LE		
	me, Mailing Address	& Phone		b. Job Title/Profession	n	d. Comme	nts	
	e city, state, & zip)			Retired				
	aron P. Harris			- English to by the				
	ount Hope Driv n Salem, NC 27			c. Employer's Name/S	Specific Field			
	5-6732					e Election	Sum to Date	
						\$	1800.	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y		k. Amou	
	1980HS	СК			05/16/		\$	1150.00
			-				\$	1100.00
							\$	
3. Contr	ibutor Informati	OB		Add Re	move	1 F. 12	\$	
	me, Mailing Address			b. Job Title/Profession	the state of the s	d. Comme	nte	
	city, state, & zip)			Pastor		u. Comme	1113	
Robert	Barr							
1966 Wa	aterford Villa	ge Drive		c. Employer's Name/S	pecific Field			
A								
	ons, NC 27012			Agape Faith C	hurch			
lemno	ons, NC 27012			2101 Lewisvil	le Clemmons	e. Election	Sum to Date	
	ons, NC 27012				le Clemmons	e. Election	Sum to Date 7304.3	
	g. Account Code	h. Form of Payment	i. In-I	2101 Lewisvil	le Clemmons	\$		32
		h. Form of Payment Debit		2101 Lewisvil Clemmons, NC	le Clermons 27012	\$ yyy)	7304.3	3 2 nt
	g. Account Code			2101 Lewisvil Clemmons, NC	le Clemmons 27012 j. Date (mm/dd/y	\$ yyy)	7304.3 k. Amou	3 2 nt
	g. Account Code			2101 Lewisvil Clemmons, NC	le Clemmons 27012 j. Date (mm/dd/y	\$ yyy)	7304.3 k. Amou \$	3 2 nt
f. Prior	g. Account Code 1980HS ibutor Informatio	Debit		2101 Lewisvil Clemmons, NC Kind Description Inting Cards Add Re	le Clemmons 27012 j. Date (mm/dd/y 05/16/2	\$ yyyy) 2022	7304.3 k. Amou \$ \$ \$	32
f. Prior	g. Account Code 1980HS	Debit		2101 Lewisvil Clemmons, NC Kind Description Inting Cards	le Clemmons 27012 j. Date (mm/dd/y 05/16/2	\$ yyy)	7304.3 k. Amou \$ \$ \$	3 2 nt
2. Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address	Debit		2101 Lewisvil Clermons, NC Mind Description Inting Cards Add Re b. Job Title/Profession	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022	7304.3 k. Amou \$ \$ \$	3 2 nt
2. Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address	Debit		2101 Lewisvil Clemmons, NC Mind Description Inting Cards Add Rea b. Job Title/Profession c. Employer's Name/S	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022	7304.3 k. Amou \$ \$ \$	3 2 nt
E. Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address	Debit		2101 Lewisvil Clermons, NC Mind Description Inting Cards Add Re b. Job Title/Profession	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022 d. Commer	7304.3 k. Amou \$ \$ \$	3 2 nt
Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address	Debit		2101 Lewisvil Clemmons, NC Mind Description Inting Cards Add Rea b. Job Title/Profession c. Employer's Name/S	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022 d. Commer	7304.3 k. Amou \$ \$ \$	3 2 nt
Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address	Debit	Pri	2101 Lewisvil Clemmons, NC Mind Description Inting Cards Add Rea b. Job Title/Profession c. Employer's Name/S	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022 d. Commer e. Election \$	7304.3 k. Amou \$ \$ \$	32 nt 452.82
2. Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address city, state, & zip)	Debit On & Phone	Pri	2101 Lewisvil Clemmons, NC Mind Description Inting Cards Add Res b. Job Title/Profession c. Employer's Name/S A	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022 d. Commer e. Election \$	7304.3 k. Amou \$ \$ \$ s	32 nt 452.82
2. Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address city, state, & zip)	Debit On & Phone	Pri	2101 Lewisvil Clemmons, NC Mind Description Inting Cards Add Res b. Job Title/Profession c. Employer's Name/S A	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022 d. Commer e. Election \$	7304.3 k. Amou \$ \$ \$ \$ s s s s k. Amou k. Amou	32 nt 452.82
Prior	g. Account Code 1980HS ibutor Informatione, Mailing Address city, state, & zip)	Debit On & Phone	Pri	2101 Lewisvil Clemmons, NC Mind Description Inting Cards Add Res b. Job Title/Profession c. Employer's Name/S A	le Clemmons 27012 j. Date (mm/dd/y 05/16/2 move	\$ yyyy) 2022 d. Commer e. Election \$	7304.3 k. Amou \$ \$ s s s s k. Amou k. Amou \$	32 nt 452.82

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of

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Contributions from Individuals

Amendment

🗌 Yes 🖂

No

Disbursem	ients			Pg	1 0	f 2 Yes No
Use this for	m to report exp	enditures fro	m the committee			expenses, contributions to
candidate/po						
	and coordinated		tures.			P
	Full Name (and Fun for School Boa					2. ID Number
3. Type of Dist			CRO-1310 forms for e	anah tu	no of Dickness	7CQEQ6
Operating 1	- Para		andidates/Political Committee			Coordinated Party Expenditures
4. Payee Inform			Add		Remove	
a. Full Name, Mai	ling Address & Phone		b. Coordinated Commi	ittee Nar	and the second se	d. Comments
(include city, state	, & zip)					
Truist						
	ville Clemmons R	oad	c. Level Registered (Sp			
Clemmons, N			Federal County:			
800-226-522	6		State		Municipality:	e. Election Sum to Date
						\$ 36.11
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	y)	j. Amount	k. Required Remarks
1980 HS	Bk Draft	к	05/31/2022		\$3.00	Bank Charges
					\$	
4. Payee Inform	ngtion		Add			
	ing Address & Phone		b. Coordinated Commit	L.	Remove	d. Comments
(include city, state,			D. Coor diffated Continue	nice Man		d. Comments
Truist						
2629 Lewisv	ille Clemmons Ro	oad	c. Level Registered (Spe	ecify)		_
Clemmons, N	C 27012		Federal	\boxtimes	County:	
			State		Municipality:	e. Election Sum to Date
						\$ 39.11
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	a	j. Amount	k. Required Remarks
400010				06/30/2022 \$3.00		Bank Charges
1980HS	Bk Draft	к	06/30/2022			Durik onargeo
					\$	
4. Payee Inform	nation		Add		Remove	
	ing Address & Phone		b. Coordinated Commit	1011110		d. Comments
(include city, state,						Reimb sign
Robert Barr						purchase
	ord Village Driv	/e	c. Level Registered (Spe	ecify)		
Clemmons, N	C 27012		Federal	\boxtimes	County:	
			State		Municipality:	e. Election Sum to Date
						\$ 1644.58
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy))	j. Amount	k. Required Remarks
1980HS	check 948893	Α	05/09/2022	:	\$1644.58	Reimbsign
					\$	
5. Total only th	is Page				Ψ	\$ 1650.58
the second s	CRO-1310 Pages	11110				φ 1050.30
(This line goes in l	ine 13a of Detailed Summ					¢ 0000 F0
			if Contrib to Candidates/Pe			\$ 2000.58
			if Coordinated Party Exper			
7. Purpose Cod A* - Media	es (List detaile B* - Printing			ove)	D T I	
E - Salaries	F* - Equipment	C* - Fund G - Politic				ther Candidate ng Public Office Expenses
I - Postage	J - Penalties		e Expenses			tion to Legal Expense Fund
O* - Other						-

Amendment

CRO-1310

NC State Board of Elections

December 2009

Disburser	nents		Pg		Amendment
Use this fo	m to report e	expenditures from	m the committee for	<u>2</u> o •: operating	f <u>2</u> <u>Yes</u> <u>N</u> expenses, contributions to
ournitiees	and coordinate	a party expend	itures.	, pointing	
1. Committee	Full Name (and H	fund if applicable)			2. ID Number
	r for School B				700506
3. Type of Dis	the second se	Please use separate	CRO-1310 forms for each	h type of Disburs	ement.)
Operating	Expenses	Contributions to C	andidates/Political Committees		Coordinated Party Expenditures
4. Payee Infor		\boxtimes	Add	Remove	
	iling Address & Phon	e	b. Coordinated Committee	Name	d. Comments
(include city, state Quent in Ba			-		
	nt Hills Road				
Lexington,			c. Level Registered (Specify		
336-309-01			Federal X		
000-000-01	55		State	Municipality:	e. Election Sum to Date
					\$ 200.00
f. Account Code	g. Form of Paymer	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1980 HS	CK 1001	0	05/10/2022	\$200.00	Campaign Help
				\$	
4. Payee Inform	nation		Add	Permove	
and the second se	ling Address & Phone		b. Coordinated Committee		d. Comments
(include city, state					G. COMMENTS
Scottie Lyc			7		
121 Spruce			c. Level Registered (Specify)	
Mocksville,	NC 27028		Federal X	County:	
336-955-537	'1		State	Municipality:	e. Election Sum to Date
				panty.	C. Liccuon Sum to Date
					\$ 100.00
f. Account Code	g. Form of Paymen	t h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1980HS	CK 1002	0	05/10/2022	\$100.00	Campaign Help
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee N	Vame	d. Comments
(include city, state,	& zip)				
Alondre' Si					
924 Hampton	Street		c. Level Registered (Specify)		
Eden, NC 27	288		Federal X	County:	
336-612-528	8		State	Municipality:	e. Election Sum to Date
f Account Cada	- D AD	h B c i			\$ 50.00
f. Account Code	g. Form of Payment		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1980HS	CK 1003	0	05/10/2022	\$50.00	Campaign Help
				\$	
5. Total only thi				North Line and	\$ 350.00
	CRO-1310 Pages			A. 建油和34-50	• • • • • • • • • • • • • • • • • • • •
(Inis une goes in li	ine 13a of Detailed Sur	nmary Page CRO-1100	f Operating Expenses)		¢ 2000 co
(Inis une goes in li (This line goes in li	ine 13b of Detailed Sur	nmary Page CRO-1100 i	f Contrib to Candidates/Politica	al Comm)	\$ 2000.58
7 Distance goes in li	ne 13c of Detailed Sun	nmary Page CRO-1100 i	f Coordinated Party Expenditur	res)	
/. Purpose Code A* - Media	B* - Printing	ed expenditure	code in (h.) above)		
E - Salaries	F* - Equipmen	t C* - Fund t G - Politica			her Candidate
- Postage	J - Penalties	K* - Office		H° - Holding	g Public Office Expenses on to Legal Expense Fund
O* - Other					in to Legal Expense Fund
* Codes require	e detailed explana	tion in required rea	marks field (k)		

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baen GROE 6205 fandn - Kind Contributions were o	r will be	refu	nded within	7 dav	/S.
1. Committee Full Name (and Fund if applicable)					ID Number
Robert Barr for School Board					7CQEQ6
3. Contributor Information Add	Remov	9			A Providence of the second
a. Full Name, Mailing Address & Phone			Contributor	c. C	omments
(include city, state, & zip)	\square	Indiv	vidual		
Robert Barr		Cano	didate		
1966 Waterford Village Drive		Party		1	
Clemmons, NC 27012 336-399-6374		PAC			
300-000-0014			rendum r Receipt Source		lection Sum to Date
				\$	7314.32
e. Description Printing Cards (Staples)			f. Date (mm/dd/yy	ууу)	g. Fair Market Amount
			05/16/20	22	\$ 452.82
					\$
					\$
3. Contributor Information Add	Remove			133	CASE WALLSTONE
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Typ		ontributor	c. Co	omments
(menue eny, state, & zip)		Indiv Cand			
		Party			
		PAC			
	Referendum		endum	d. Election Sum to Date	
		Other	Receipt Source	\$	
e. Description			f. Date (mm/dd/yy	yy)	g. Fair Market Amount
Printing					\$
Signs					\$
Signs					\$
Contributor Information	Remove			1.53	
. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Typ		ntributor	c. Co	mments
(Indivi Candi			
		Party	uale		
		PAC			
	,	Refere	endum	d. Ele	ection Sum to Date
	Other Receipt		Receipt Source		
Description			f. Date (mm/dd/yyy		g. Fair Market Amount
					\$
					\$
					\$
. Total only this Page				\$	452.82
. Total of ALL CRO-1510 Pages					•
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	452.82

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