

# Disclosure Report Cover

Amendment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

1. Committee Information			
a. Full Name		c. ID Number	
COMMITTEE TO ELECT HOLLOWAY			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
3020 COBDEN COURT LELAND, NC 28451			
		e. Phone Number	
		661-607-5253	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2021	10/19/2021	11/28/2022	JANET FEAR
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
		<input checked="" type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund"			
<input type="checkbox"/> Building Fund			
<input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
10			
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
FIRST BANK			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CONTRIBUTIONS AND REIMBURSEMENTS	RJH		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 952.42		\$
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.			
Janet Fear		Janet Fear	1/23/22
Printed Name of Signer		Signature of Appointed Treasurer	Date
FOR OFFICE USE ONLY			
Date Received:	Employee:	Delivery Method	
		<input type="checkbox"/> Normal Mail	
Date Postmarked: JAN 26 2022	Employee:	<input checked="" type="checkbox"/> Registered Mail	
Date Scanned: BRUNSWICK COUNTY BOARD OF ELECTIONS	Employee:	<input type="checkbox"/> Hand Delivered	
Date Data Entered:	Employee:	<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	
COMMITTEE TO ELECT HULLOHAN	YEAR END SEMI-ANNUAL		
Start of Election Cycle: January 1,	<u>2018</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 952.42	\$ 0
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 75.00	\$ 255.00
6) Contributions from Individuals (CRO-1210)		\$ 4,758.86	\$ 7,093.45
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$ 1,750.00	\$ 1,750.00
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)		\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 6,583.86	\$ 9,098.45
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$	\$
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)		\$	\$
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 1,295.87	\$ 1,433.45
17) In-Kind Contributions (CRO-1510)		\$ 1,408.86	\$ 2,833.45
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 2,704.73	\$ 4,266.90
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 4,831.55	\$ 4,831.55
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$	\$
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$	\$
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)		\$	\$



# Contributions from Individuals

Pg 1 of 2

Amendment  
 Yes  No

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>	
COMMITTEE TO ELECT HOLLOWAY						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DAVID SINK, JR 793 GEORGE II HWY SE WINNABOW, NC 28479 828-674-8521			NO JOB TITLE / PROFESSION			
			<b>c. Employer's Name/Specific Field</b>			
			NOT EMPLOYED		<b>e. Election Sum to Date</b>	
					\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	RJH	CHECK		10/26/21		\$ 250.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MATTHEW HALEY 6701 WINDINGWOOD LANE WILMINGTON, NC 28411 910-338-8602			NO JOB TITLE / PROFESSION			
			<b>c. Employer's Name/Specific Field</b>			
			NOT EMPLOYED		<b>e. Election Sum to Date</b>	
					\$ 2,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	RJH	CHECK		10/25/21		\$ 2,000.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
A. J. EARP 1201 AIRLIE ROAD WILMINGTON, NC 28403 910-383-1425			NO JOB TITLE / PROFESSION			
			<b>c. Employer's Name/Specific Field</b>			
			NOT EMPLOYED		<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	RJH	CHECK		10/26/21		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					\$ 2750.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 4758.96	

# Contributions from Individuals

Amendment  
 Yes  No

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>	
COMMITTEE TO ELECT HOLLOWAN						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PERRY DAVIS JR PO BOX 544 WILMINGTON, NC 28402			NO JOB TITLE/PROFESSION			
			<b>c. Employer's Name/Specific Field</b>			
			NOT EMPLOYED		<b>e. Election Sum to Date</b>	
					\$ 2,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	RJH	CHECK		10/25/21		\$ 2,000.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JANET FEAR 11330 CROSS WATER CIRCLE LELAND, NC 28451 661-607-5253			NO JOB TITLE/PROFESSION			
			<b>c. Employer's Name/Specific Field</b>			
			NOT EMPLOYED		<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"/>	RJH	CASH	POSTAGE	9/23/21		\$ 4.33
<input type="checkbox"/>	RJH	CASH	POSTAGE	10/19/21		\$ 4.53
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<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>					\$ 2008.86	
<b>5. Total of ALL CRO-1210 Pages</b> <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 4758.86	

# Contributions from Other Political Committees

Use this form to report contributions from other candidate, referendum or PAC committees

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT. HULLOMAN					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Type of Committee</b>		<b>d. Comments</b>
BRUNSWICK FUTURE PAC PO BOX 1962 LELAND, NC 28451			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
					\$ 1,060.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
RJH	CHECK		10/11/21	\$ 1,000.00	
				\$	
				\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Type of Committee</b>		<b>d. Comments</b>
NC HOME BUILDERS ASSOC. BUILD POLITICAL ACTION COMMITTEE PO BOX 99090 RALEIGH, NC 27624			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
					\$ 250.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
RJH	CHECK		10/01/21	\$ 250.00	
				\$	
				\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Type of Committee</b>		<b>d. Comments</b>
NC REALTORS PAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
					\$ 500.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
				\$	
<b>4. Total only this Page</b>				\$ 1750.00	
<b>5. Total of ALL CRO-1230 Pages</b> <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>				\$ 1750.00	

# Refunds/Reimbursements From the Committee

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Amendment
<input type="checkbox"/> Yes <input type="checkbox"/> No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number		
COMMITTEE TO ELECT HULLOMAN					
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		h. Original Receipt Date
JANET FEAR 1330 CROSS WATER CIRCLE LELAND, NC 28451			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		9/23/21 & 10/19/21
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered		i. Original Receipt Amount
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$ 8.86
			<input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
			f. Purpose Code		j. Election Sum to Date
			L		\$ 146.44
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k. Account Code
NO JOB TITLE/PROF		NOT EMPLOYED			RJH
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)		o. Amount
CHECK	POSTAGE		10/19/21		\$ 8.86
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		h. Original Receipt Date
RICHARD HULLOMAN 3020 COBDEN COURT			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		9/27/21 to 10/13/21
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered		i. Original Receipt Amount
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$ 1287.01
			<input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
			f. Purpose Code		j. Election Sum to Date
			L		\$ 1287.01
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k. Account Code
OWNER					RJH
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)		o. Amount
CHECK	MEET/GREET EXPENSES/CAMPAIGN SIGNS		1/14/22		\$ 1287.01
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		h. Original Receipt Date
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered		i. Original Receipt Amount
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
			f. Purpose Code		j. Election Sum to Date
					\$
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)		o. Amount
					\$
4. Total only this Page					\$ 1295.87
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)					\$ 1295.87
6. Purpose Codes (List detailed disbursement code in (f) above)					
L - Returned to Contributor		M - Overpayment for Service		N - Exceeded Contribution Limit	
P* - Reimbursement of In-Kind		O* Other			
* Codes require detailed explanation in required remarks field (m)					

# In-Kind Contributions

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>
COMMITTEE TO ELECT HOLLOMAN		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
JANET FEAR 1330 CROSS WATER CIRCLE HELAND, NC 28451 661-607-5253	<input checked="" type="checkbox"/> Individual	
	<input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>d. Election Sum to Date</b> \$ 146.44
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
POSTAGE	9/23/21	\$ 4.33
POSTAGE	10/19/21	\$ 4.53
		\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
RICHARD HOLLOMAN 3020 COBDEN COURT HELAND, NC 28451	<input type="checkbox"/> Individual	
	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>d. Election Sum to Date</b> \$ 2687.01
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
FLYERS	10/26/21	\$ 1400.00
		\$
		\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
	<input type="checkbox"/> Individual	
	<input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>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>		\$ 1408.86
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 1408.86