

Disclosure Report Cover

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.

Amendment

Yes No

1. Committee Information									
a. Full Name RICKY HOOKS FOR WAYNE COUNTY SHERIFF		Wayne County Board of Elections	c. ID Number						
b. Mailing Address (include City, State and Zip Code) 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		JUL 22 2025 Received By	d. Date Filed 07/21/2025						
e. Phone Number (919) 222-4236									
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name						
2025	04/22/2025	06/30/2025	LAURA HILL						
6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category) <table border="1"> <tr> <td>Municipal</td> <td>State/County</td> <td>Referendum</td> </tr> <tr> <td> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special </td> </tr> </table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
Municipal	State/County	Referendum							
<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special							
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		10. Special Report Name							
8. Number of Fundraisers this Report 0									
3. Account Information		3. Account Information							
a. Financial Institution Full Name SOUTHERN BANK AND TRUST		a. Financial Institution Full Name							
b. Purpose CAMPAIN FUNDS	c. Account Code 1	b. Purpose	c. Account Code						
	d. Period Begin Balance \$ 100.00		d. Period Begin Balance \$						
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									
<u>Laura Hill</u> Printed Name of Signer	<u>Laura Hill</u> Signature of Appointed Treasurer		07/21/2025 Date						
FOR OFFICE USE ONLY									
Date Received:	07/22/25	Employee:	<i>lvt</i>						
Date Postmarked:		Employee:							
Date Scanned:		Employee:							
Date Data Entered:		Employee:							
Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed									
<input type="checkbox"/> Signer has not received mandatory training									
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.									
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.									

Detailed Summary

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF	2025 Mid Year Semi-Annual		
Start of Election Cycle: January 1, 2025		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 100.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00	\$ 100.00
6) Contributions from Individuals	(CRO-1210)	\$ 6,385.60	\$ 6,385.60
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 5,000.00	\$ 5,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 11,385.60	\$ 11,485.60
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 2,539.58	\$ 2,539.58
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 10.84	\$ 10.84
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 705.15	\$ 705.15
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,255.57	\$ 3,255.57
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 8,230.03	\$ 8,230.03
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 5,000.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Contributions from Individuals

Pg 1 of 3 Yes No

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

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF		2. ID Number									
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip) JOSEPH DAWSON 106 TORHUNTA DRIVE GOLDSBORO, NC 27534</td> <td>b. Job Title/Profession POLICE OFFICER</td> <td colspan="2">d. Comments</td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field STATE OF NC</td> <td colspan="2">e. Election Sum to Date \$ 152.27</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip) JOSEPH DAWSON 106 TORHUNTA DRIVE GOLDSBORO, NC 27534	b. Job Title/Profession POLICE OFFICER	d. Comments			c. Employer's Name/Specific Field STATE OF NC	e. Election Sum to Date \$ 152.27	
a. Full Name, Mailing Address & Phone (include city, state, & zip) JOSEPH DAWSON 106 TORHUNTA DRIVE GOLDSBORO, NC 27534	b. Job Title/Profession POLICE OFFICER	d. Comments									
	c. Employer's Name/Specific Field STATE OF NC	e. Election Sum to Date \$ 152.27									
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount						
<input type="checkbox"/>	1	Credit Card		05/31/2025	\$ 100.00						
<input type="checkbox"/>	1	Credit Card		06/30/2025	\$ 52.27						
<input type="checkbox"/>					\$						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove											
a. Full Name, Mailing Address & Phone (include city, state, & zip) BAYLEE HARVEY 14 ASCOT POINT CIRCLE ASHEVILLE, NC 28803		b. Job Title/Profession VOLUNTEER MANAGER	d. Comments								
		c. Employer's Name/Specific Field UNC PARDEE HOSPITAL	e. Election Sum to Date \$ 388.40								
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount						
<input type="checkbox"/>	1	In-Kind	SQUARE SPACE WEBSITE DESIGNER	04/22/2025	\$ 248.40						
<input type="checkbox"/>	1	In-Kind	DOMAIN NAME PURCHASE	04/27/2025	\$ 140.00						
<input type="checkbox"/>					\$						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove											
a. Full Name, Mailing Address & Phone (include city, state, & zip) KENNETH HARVEY 124 CAROLINE WAY SOUTHERN PINES, NC 28387		b. Job Title/Profession DIRECTOR CMT COMPLEX	d. Comments								
		c. Employer's Name/Specific Field US ARMY	e. Election Sum to Date \$ 100.00								
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount						
<input type="checkbox"/>	1	Credit Card		05/30/2025	\$ 100.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
4. Total only this Page				\$ 640.67							
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ 6,385.60							

Contributions from Individuals

Pg 2 of 3 Yes No

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

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF	2. ID Number
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3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) GERALD HOOKS 6523 SHIRE LANE WILMINGTON, NC 28411		b. Job Title/Profession NO JOB TITLE	d. Comments
		c. Employer's Name/Specific Field NOT EMPLOYED	
			e. Election Sum to Date \$ 5,196.75

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Credit Card		05/28/2025	\$ 5,196.75
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		b. Job Title/Profession EXECUTIVE DIRECTOR	d. Comments
		c. Employer's Name/Specific Field MT OLIVE FAMILY MEDICINE CENTER, INC	
			e. Election Sum to Date \$ 383.25

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input checked="" type="checkbox"/>	1	Cash		04/11/2025	\$ 50.00
<input type="checkbox"/>	1	In-Kind	BIG BLUE COUCH CAMPAIGN PHOTOS	05/06/2025	\$ 106.75
<input type="checkbox"/>	1	In-Kind	US POST OFFICE BOX	05/16/2025	\$ 210.00

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		b. Job Title/Profession EXECUTIVE DIRECTOR	d. Comments
		c. Employer's Name/Specific Field MT OLIVE FAMILY MEDICINE CENTER, INC	
			e. Election Sum to Date \$ 383.25

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Credit Card		05/30/2025	\$ 16.50
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 5,530.00
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5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>	\$ 6,385.60
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Contributions from Individuals

Pg 3 of 3 Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF	2. ID Number
--	---------------------

3. Contributor Information		
<input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) RICKY HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530	b. Job Title/Profession NONE	d. Comments
	c. Employer's Name/Specific Field NOT EMPLOYED	e. Election Sum to Date \$ 60.70

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input checked="" type="checkbox"/>	1	Cash		04/11/2025	\$ 50.00
<input type="checkbox"/>	1	Credit Card		05/28/2025	\$ 10.70
<input type="checkbox"/>					\$

3. Contributor Information		
<input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) JAN JONES 1709 CEDAR POINT ROAD NEWTON GROVE, NC 28366	b. Job Title/Profession RADIOLOGY DEPARTMENT MANAGER	d. Comments
	c. Employer's Name/Specific Field MT OLIVE FAMILY MEDICINE CENTER, INC	e. Election Sum to Date \$ 104.23

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Credit Card		06/25/2025	\$ 104.23
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		
<input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) AUSTIN KORNEGAY 903 RALEIGH ROAD CLINTON, NC 28328	b. Job Title/Profession POLICE OFFICER	d. Comments
	c. Employer's Name/Specific Field CITY OF DUNN	e. Election Sum to Date \$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Credit Card		06/05/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 214.93
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5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 6,385.60
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Loan ProceedsPg 1 of 1 Amendment
 Yes No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF		2. ID Number								
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip) RICKY HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530</td> <td>b. Job Title/Profession NONE</td> <td>d. Comments</td> </tr> <tr> <td>e. Start Date (mm/dd/yyyy) 05/09/2025</td> </tr> <tr> <td rowspan="2"></td> <td>c. Employer's Name/Specific Field NOT EMPLOYED</td> <td>f. End Date (mm/dd/yyyy)</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip) RICKY HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530	b. Job Title/Profession NONE	d. Comments	e. Start Date (mm/dd/yyyy) 05/09/2025		c. Employer's Name/Specific Field NOT EMPLOYED	f. End Date (mm/dd/yyyy)
a. Full Name, Mailing Address & Phone (include city, state, & zip) RICKY HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530	b. Job Title/Profession NONE	d. Comments								
	e. Start Date (mm/dd/yyyy) 05/09/2025									
	c. Employer's Name/Specific Field NOT EMPLOYED	f. End Date (mm/dd/yyyy)								
	g. Rate %	h. Security Pledged	i. Account Code 1	j. Form of Payment Check						
			k. Amount \$ 5,000.00							
l. Full Name of Lending Institution			m. Loan Number							
4. Endorsers/Makers (The people who guarantee the loan) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>d. Percentage %</td> <td>e. Amount \$</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Percentage %	e. Amount \$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field								
	d. Percentage %	e. Amount \$								
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)			5. Total of ALL CRO-1410 Pages \$ 5,000.00							

CRO-1410

NC State Board of Elections

April 2007

Disbursements

Amendment

Pg 1 of 2 Yes No

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

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF		2. ID Number																													
3. Type of Disbursement <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																															
4. Payee Information <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530</td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> State <input type="checkbox"/> Municipality</td> <td></td> </tr> <tr> <td colspan="2"></td> <td colspan="2">e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td colspan="2">\$ 2,143.89</td> </tr> </table>		a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530						c. Level Registered (Specify)				<input type="checkbox"/> Federal <input type="checkbox"/> County				<input type="checkbox"/> State <input type="checkbox"/> Municipality				e. Election Sum to Date				\$ 2,143.89		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments																												
ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530																															
		c. Level Registered (Specify)																													
		<input type="checkbox"/> Federal <input type="checkbox"/> County																													
		<input type="checkbox"/> State <input type="checkbox"/> Municipality																													
		e. Election Sum to Date																													
		\$ 2,143.89																													
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																										
1	Debit Card	O	06/13/2025	\$ 144.11	BUSINESS CARDS																										
1	Debit Card	O	06/26/2025	\$ 526.28	POLO SHIRTS																										
4. Payee Information <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530</td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> State <input type="checkbox"/> Municipality</td> <td></td> </tr> <tr> <td colspan="2"></td> <td colspan="2">e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td colspan="2">\$ 2,143.89</td> </tr> </table>		a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530						c. Level Registered (Specify)				<input type="checkbox"/> Federal <input type="checkbox"/> County				<input type="checkbox"/> State <input type="checkbox"/> Municipality				e. Election Sum to Date				\$ 2,143.89		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
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		\$ 2,143.89																													
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																										
1	Debit Card	O	06/26/2025	\$ 1,473.50	TSHIRTS																										
				\$																											
4. Payee Information <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">CANVA US INC 3212 EAST CESAR CHAVEZ STREET AUSTIN, TX 78702</td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County</td> <td></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> State <input type="checkbox"/> Municipality</td> <td></td> </tr> <tr> <td colspan="2"></td> <td colspan="2">e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td colspan="2">\$ 120.00</td> </tr> </table>		a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	CANVA US INC 3212 EAST CESAR CHAVEZ STREET AUSTIN, TX 78702						c. Level Registered (Specify)				<input type="checkbox"/> Federal <input type="checkbox"/> County				<input type="checkbox"/> State <input type="checkbox"/> Municipality				e. Election Sum to Date				\$ 120.00		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments																												
CANVA US INC 3212 EAST CESAR CHAVEZ STREET AUSTIN, TX 78702																															
		c. Level Registered (Specify)																													
		<input type="checkbox"/> Federal <input type="checkbox"/> County																													
		<input type="checkbox"/> State <input type="checkbox"/> Municipality																													
		e. Election Sum to Date																													
		\$ 120.00																													
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																										
1	Debit Card	O	06/10/2025	\$ 120.00	LOGO DESIGN																										
				\$	SOFTWARE																										
5. Total only this Page				\$	2,263.89																										
6. Total of ALL CRO-1310 Pages				\$	2,539.58																										
<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>				\$																											
7. Purpose Codes (List detailed expenditure code in (h) above)																															
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate																												
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses																												
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund																												
O* Other																															
* Codes require detailed explanation in required remarks field (k)																															

Disbursements

Amendment

Pg 2 of 2 Yes No

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

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF		2. ID Number										
3. Type of Disbursement <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												
4. Payee Information <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Add <input type="checkbox"/> Remove </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td style="width: 33%; padding: 5px;">b. Coordinated Committee Name</td> <td style="width: 33%; padding: 5px;">d. Comments</td> </tr> <tr> <td rowspan="2" style="padding: 5px;">STAPLES OFFICE SUPPLY 1101 B. BERKELEY PLAZA GOLDSBORO, NC 27534</td> <td style="padding: 5px;">c. Level Registered (Specify)</td> <td rowspan="2" style="padding: 5px;">e. Election Sum to Date</td> </tr> <tr> <td style="padding: 5px;"> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: </td> </tr> <tr> <td style="padding: 5px;">\$ 64.04</td> <td style="padding: 5px;"></td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments	STAPLES OFFICE SUPPLY 1101 B. BERKELEY PLAZA GOLDSBORO, NC 27534	c. Level Registered (Specify)	e. Election Sum to Date	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	\$ 64.04	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments										
STAPLES OFFICE SUPPLY 1101 B. BERKELEY PLAZA GOLDSBORO, NC 27534	c. Level Registered (Specify)	e. Election Sum to Date										
	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:											
\$ 64.04												
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks							
1	Debit Card	O	06/14/2025	\$ 64.04	BUSINESS CARDS							
				\$								
4. Payee Information				<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Add <input type="checkbox"/> Remove </div>								
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments								
						c. Level Registered (Specify)						
STRIPE 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080-1912		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date								
						\$ 222.49						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks							
1	Draft	O	05/31/2025	\$ 211.65	CREDIT CARD FEES							
				\$								
5. Total only this Page				\$ 275.69								
6. Total of ALL CRO-1310 Pages				\$ 2,539.58								
<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>												
7. Purpose Codes <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												
* Codes require detailed explanation in required remarks field (k)												

Aggregated Non-Media Expenditures

Amendment
Page 1 of 1 Yes No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add	1	Draft	O	06/30/2025	\$ 10.84	CREDIT CARD FEES
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 10.84	
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 10.84	
6. Purpose Codes (List detailed expenditure codes in (g) above)						
E - Salaries	B* - Printing	F - Fundraising	G - Political Party	H - Holding Public Office Expenses		
I - Postage	P - Equipment	J - Penalties	K - Office Expenses	Q* - Donations to Legal Expense Fund		
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind ContributionsAmendment
Pg 1 of 1 Yes No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF		2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) BAYLEE HARVEY 14 ASCOT POINT CIRCLE ASHEVILLE, NC 28803	b. Type of Contributor	c. Comments	
	<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			
d. Election Sum to Date		\$ 388.40	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
SQUARE SPACE WEBSITE DESIGNER		04/22/2025	\$ 248.40
DOMAIN NAME PURCHASE		04/27/2025	\$ 140.00
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530	b. Type of Contributor	c. Comments	
	<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			
d. Election Sum to Date		\$ 383.25	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
BIG BLUE COUCH CAMPAIGN PHOTOS		05/06/2025	\$ 106.75
US POST OFFICE BOX		05/16/2025	\$ 210.00
			\$
4. Total only this Page			\$ 705.15
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 705.15

Outstanding Loans

Amendment
Pg 1 of 1 Yes No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF		2. ID Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) RICKY HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		b. Job Title/Profession NONE	d. Comments
		e. Start Date (mm/dd/yyyy) 05/09/2025	
		c. Employer's Name/Specific Field NOT EMPLOYED	f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Original Loan Amount \$ 5,000.00	j. Remaining Loan Balance \$ 5,000.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 5,000.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 5,000.00	

CRO-1430

NC State Board of Elections

December 2007



NORTH CAROLINA

STATE BOARD OF ELECTIONS

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

• Name of committee to receive loan:	Ricky Hooks for Wayne County Sheriff
• Person or committee to make loan:	Ricky Hooks
• Date of loan to committee:	May 9, 2025
• Name of lending institution (source):	
• Amount of loan:	\$5000.00
• Description (if in-kind loan):	
• Names of all parties responsible for payment of loan (wayne, County, Board of Elections)	wayne, County Board of Elections
• Period of loan:	JUL 23 2025
• Rate of interest of loan:	Received By
• Security pledged for loan:	

I, Ricky Hooks, acknowledge that all of the information
(Person lending money to committee) provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Ricky Hooks
Signature of Lender

7-23-2025
Date Signed

Ricky Hooks
Signature of Treasurer of Committee

7/23/25
Date Signed